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#### FEC FORM 3X

Only

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines Libertarian National Committee 2600 Virginia Ave NW ADDRESS (number and street) Suite 200 Check if different than previously Washington DC 20037 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00255695 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 0 1 0 1 2007 0 1 3 1 2007 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Aaron Starr Type or Print Name of Treasurer Electronically Filed by Aaron Starr 02 20 2007 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003)

#### Image# 27950089380

#### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Libertarian National Committee <sup>®</sup> D " D 0 1 0 1 2007 0 1 3 1 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand <sup>°</sup>2007 5602.24 January 1 (b) Cash on Hand at 5602.24 Begining of Reporting Period ..... 83197.76 83197.76 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 88800.00 88800.00 6(a) and 6(c) for Column B) ..... 79128.35 79128.35 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 9671.65 9671.65 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 45624.09 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

#### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name Libertarian National Committee

Report Covering the Period:

м м 0 1

From:

01

2007

.<sub>o</sub>.

м м 0 1 <sup>D</sup> 3 1

<sup>Y</sup> 2007

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:     (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	11475.00	11475.00
(ii) Unitemized	71722.76	71722.76
(iii) TOTAL (add Lines 11(a)(i) and (ii) <b>&gt;</b>	83197.76	83197.76
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	83197.76	83197.76
Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
Loan Repayments Received      Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds	3	
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	83197.76	83197.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	83197.76	83197.76

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)  (i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating  Expenditures	78988.35	78988.35
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	78988.35	78988.35
2.	Transfers to Affiliated/Other Party	7 0300.03	76366.33
	Committees	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	0.00	0.00
	Independent Expenditure (use Schedule E) Coordinated Expenditures Made by Party	0.00	0.00
υ.	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
8.	Refunds of Contributions To:  (a) Individuals/Persons Other Than Political Committees	140.00	140.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	140.00	140.00
9.	Other Disbursements	0.00	0.00
80.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	79128.35	79128.35
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	79128.35	79128.35

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	83197.76	83197.76
34. Total Contribution Refunds (from Line 28(d))	140.00	140.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	83057.76	83057.76
66. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	78988.35	78988.35
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	78988.35	78988.35

TTEMIZED RECEIPTS    Detailed Summary Page   Check only one)   Tital   110	SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 6 / 78		
Any information copied from such Reports and Statements may not be sold or used by any person of the purpose of soliciting contributions of to commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.    Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee.   Any information accommittee to solicit contributions from such committee.	-				(check only one)		
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.    NAME OF COMMITTEE (In Full)   Libortarian National Committee	••	TI EIMIZED TIEGEII TO		Detailed Summary Page			
Transaction ID: SA11A1.216714    Name (Last, First, Middle Initial)	_						
Libertarian National Committee  Full Name (Last, First, Middle Initial)  A Met B Ausley  City State Zip Code NC 28459.9442  FEC ID number of contributing federal political committee.  Name of Employer Occupation Primary General Other (specify) ▼	or	for commercial purposes, other than using the	name and ado	r not be sold or used by any personal dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.		
Full Name (Last, First, Middle Initial)  A. Mett B Justley  Mailing Address 3412 Waccamaw Shores Rd  City Lake Waccamaw NC 28459 9442  FEC ID number of contributing federal political committee.  Primary General Other (specify) ▼  State Zip Code Primary General Other (specify) ▼  State Zip Code Physician  Receipt For: Primary General Other (specify) ▼  State Zip Code Coupation Physician  Receipt For: Primary General Other (specify) ▼  State Zip Code Sol118-5616  FEC ID number of contributing federal political committee.  Coupation Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  Fec ID number of contributing federal political committee.  Coupation Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  C. Larry A Bush Mailing Address 216 Double Creek Dr  City Jarrell Ty Response To Coupation Primary General Other (specify) ▼  State Zip Code Jarrell Ty Response To Coupation Distribution Director		, ,					
A. Met B Ausley  Mailing Address 3412 Waccamaw Shores Rd  City Lake Waccamaw NC 28459.9442  FEC ID number of contributing federal political committee.  City State Zip Code Primary General Other (specify) ▼  State Zip Code Primary General Other (specify) ▼  State Zip Code City Larkspur CO 80118-5616  FEC ID number of contributing federal political committee.  City Larkspur General Occupation City Larkspur General Occupation FEC ID number of contributing federal political committee.  Name of Employer City State Zip Code Larkspur General Occupation FEC ID number of contributing federal political committee.  Name of Employer City State Zip Code Larkspur General Other (specify) ▼  State Zip Code Larkspur General Occupation FEC ID number of contributing federal political committee.  City State Zip Code Receipt For: State Zip Code Distribution  Date of Receipt For: State Zip Code Contribution  Date of Receipt For: State Zip Code Distribution  Contribution  Date of Receipt For: State Zip Code Distribution  Contribution  Date of Receipt For: State Zip Code Distribution  Contribution  Date of Receipt For: State Zip Code Distribution Director Distribution Director  Receipt For: State Zip Code Distribution Director Distribu							
City State Zip Code NC Zed50-9442  FEC ID number of contributing federal political committee.  Name of Employer Mercast Trist Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Larkspur Co 80118-5616  FEC ID number of contributing federal political committee.  Primary General Other (specify) ▼  State Zip Code Transaction ID: SA11A1.216714  Amount of Each Receipt this Period Contribution  Contribution  Contribution  Date of Receipt Transaction ID: SA11A1.216714  Amount of Each Receipt this Period Contribution  Contribution  Date of Receipt Transaction ID: SA11A1.216817  Amount of Each Receipt this Period Contribution  City State Zip Code Transaction ID: SA11A1.216817  Amount of Each Receipt this Period Contribution  FEC ID number of contributing federal political committee.  Full Name (Last, First, Middle Initial)  C. Larry ABJUS Transaction ID: SA11A1.217001  Amount of Each Receipt Transaction ID: SA11A1.217001  Amount of Each	A.	Mett B Ausley			Date of Receipt		
Lake Waccamaw   NC   28450-9442   Amount of Each Receipt this Period		Mailing Address 3412 Waccamaw Shor	es Rd		01 03 2007		
FEC ID number of contributing federal political committee.    Name of Employer Cypress Pathology   Occupation Physician				•			
Summer of Employer   Contribution   Contribution		Lake Waccamaw	NC	28450-9442	Amount of Each Receipt this Period		
Name of Employer Cypress Pathology Receipt For:			C				
Receipt For:		Name of Employer Cypress Pathology			Contribution		
Primary   General Other (specify)		Receipt For:					
Full Name (Last, First, Middle Initial)  B. Harold R. Berenson  Mailing Address 3833 Lorraine Rd  City  Larkspur  CO 80118-5616  FEC ID number of contributing federal political committee.  Name of Employer Mailing Address 216 Double Creek Dr  City  Lary A Bush  Mailing Address 216 Double Creek Dr  City  Jarrell  FEC ID number of contributing federal political committee.  C Larry A Bush  Mailing Address 216 Double Creek Dr  City  State Zip Code  TX 76537-1114  FEC ID number of contributing federal political committee.  C State Zip Code  TX 76537-1114  FEC ID number of contributing federal political committee.  Name of Employer  Zimmor  Other (specify) ▼  State Zip Code  TX 76537-1114  FEC ID number of contributing federal political committee.  Name of Employer  Zimmor  Other (specify) ▼  Substotal of Receipts This Page (optional)  Substotal of Receipts This Page (optional)		Primary General		000.00	1		
B. Harold R. Berenson   Mailing Address 3833 Lorraine Rd   State Zip Code   Transaction ID: SA11A1.216817   Amount of Each Receipt this Period   S00.00		Other (specify) ▼					
City Larkspur CO 80118-5616  FEC ID number of contributing federal political committee.  Name of Employer Microsoft Receipt For: Primary General Other (specify) ▼  CIty Jarrell FEC ID number of contributing federal political committee.  CL  State Zip Code S0118-5616  COccupation Engineer Aggregate Year-to-Date ▼  Contribution  Date of Receipt  Transaction ID: SA11A1.218817  Amount of Each Receipt this Period  Contribution  Contribution  Date of Receipt  Transaction ID: SA11A1.217001  Amount of Each Receipt this Period  Contribution  Contribution  Contribution  Contribution  Distribution  Contribution  Contribution	В.				Date of Receipt		
Larkspur CO 80118-5616  FEC ID number of contributing federal political committee.  Name of Employer Microsoft  Receipt For: Primary General Other (specify) ▼ State Zip Code TX 76537-1114  FEC ID number of contributing federal political committee.  C. Larry A Bush  Mailing Address 216 Double Creek Dr  City State Zip Code TX 76537-1114  FEC ID number of contributing federal political committee.  Name of Employer Zimmor  Receipt For: Primary General Occupation Distribution Director  Receipt For: Primary General Other (specify) ▼ 250.00  SUBTOTAL of Receipts This Page (optional)		Mailing Address 3833 Lorraine Rd					
FEC ID number of contributing federal political committee.  Name of Employer Microsoft  Receipt For:		City	State	Zip Code	Transaction ID: SA11A1.216817		
Name of Employer   Contribution		Larkspur	CO	80118-5616	Amount of Each Receipt this Period		
Name of Employer    Name of Employer   Cocupation			C				
Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) C. Larry A Bush Mailing Address 216 Double Creek Dr  City State Zip Code Jarrell TX 76537-1114  FEC ID number of contributing federal political committee.  Name of Employer Zimmor  Receipt For: Primary General Other (specify) ▼  Substot Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Coccupation Distribution Director  Receipt For: Primary General Other (specify) ▼  Substot Aggregate Year-to-Date ▼  1050.00		Name of Employer Microsoft	1		Contribution		
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C. Larry A Bush  Mailing Address 216 Double Creek Dr  City State Zip Code  Jarrell TX 76537-1114  FEC ID number of contributing federal political committee.  Name of Employer Zimmor  Receipt For:  Primary General  Other (specify) ▼  Subtotle Initial)  Date of Receipt  Transaction ID: SA11A1.217001  Amount of Each Receipt this Period  Contribution  Contribution  Contribution  Subtotle Initial)  Date of Receipt  Transaction ID: SA11A1.217001  Amount of Each Receipt this Period  Contribution  Contribution			199.194		1		
C. Larry A Bush  Mailing Address 216 Double Creek Dr  City State Zip Code Jarrell TX 76537-1114  FEC ID number of contributing federal political committee.  Name of Employer Zimmor  Receipt For: Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Other (specify) ▼	0 0	500.00			
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Receipt For:  Primary Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  Again Occupation Distribution Director  Aggregate Year-to-Date ▼  250.00  Contribution  Contribution  1050.00		<u>Jarrell</u>	<u>TX</u>	76537-1114	Amount of Each Receipt this Period		
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TOTAL This Period (last page this line number only)	s	UBTOTAL of Receipts This Page (optional)			1050.00		
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 78
	EMIZED RECEIPTS		or each category of the	(check only one)
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				13 14 15 16 17
or	y information copied from such Reports and S for commercial purposes, other than using the	name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	Libertarian National Committee			
A.	Full Name (Last, First, Middle Initial) John F. Carr			Date of Receipt
	Mailing Address 181 Lexington St Apt 1	9		01 / 09 / Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.217042
	Auburndale	MA	02466-1337	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Refused	Occupation Refused	n	Contribution
	Receipt For:		e Year-to-Date ▼	
	Primary General		050.00	7
	Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) William Charles Collins			Date of Receipt
	Mailing Address 505 Mallory Court			01 22 2007
	City	State	Zip Code	Transaction ID: SA11A1.217126
		TV		
	El Paso	TX	79912-4228	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	79912-4228	500.00
	FEC ID number of contributing	C		
	FEC ID number of contributing federal political committee.  Name of Employer	Occupation Hospital	1	500.00
	FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For: Primary General	Occupation Hospital	n Administrator e Year-to-Date ▼	500.00
	FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For: Primary General Other (specify)	Occupation Hospital	n Administrator	500.00
	FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For: Primary General Other (specify)   Full Name (Last, First, Middle Initial) Kelvin Contreary	Occupation Hospital	n Administrator e Year-to-Date ▼	Contribution  Date of Receipt
C.	FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Kelvin Contreary Mailing Address 1 Wren St	Occupation Hospital Aggregate	n Administrator Year-to-Date ▼ 500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C.	FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Kelvin Contreary  Mailing Address 1 Wren St  City	Occupation Hospital Aggregate	Administrator  Year-to-Date   500.00  Zip Code	Date of Receipt  O 1
c.	FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Kelvin Contreary Mailing Address 1 Wren St  City New Orleans	Occupation Hospital Aggregate	n Administrator Year-to-Date ▼ 500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
c.	FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Kelvin Contreary  Mailing Address 1 Wren St  City	Occupation Hospital Aggregate	Administrator  Year-to-Date   500.00  Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<u></u> с.	FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Kelvin Contreary  Mailing Address 1 Wren St  City New Orleans  FEC ID number of contributing	Occupation Hospital Aggregate State LA	Administrator e Year-to-Date ▼  500.00  Zip Code 70124-4121	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
c.	FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Kelvin Contreary  Mailing Address 1 Wren St  City  New Orleans  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:	C Occupation Hospital Aggregate  State LA  C Occupation Medical [	Administrator e Year-to-Date ▼  500.00  Zip Code 70124-4121	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
c.	FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Kelvin Contreary  Mailing Address 1 Wren St  City  New Orleans  FEC ID number of contributing federal political committee.  Name of Employer Self Employed	C Occupation Hospital Aggregate  State LA  C Occupation Medical [	Administrator e Year-to-Date ▼  500.00  Zip Code 70124-4121	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
c.	FEC ID number of contributing federal political committee.  Name of Employer Senior Care  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Kelvin Contreary  Mailing Address 1 Wren St  City  New Orleans  FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:  Primary General	C Occupation Hospital Aggregate  State LA  C Occupation Medical [	Administrator e Year-to-Date ▼  500.00  Zip Code 70124-4121	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 8 / 78		
•			Use separate schedule(s) or each category of the	(check only one)		
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12		
				13 14 15 16 17		
Ar	y information copied from such Reports and S	tatements may	not be sold or used by any pers	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
17	Libertarian National Committee					
_	Full Name (Last, First, Middle Initial)					
A.				Date of Receipt		
	Mailing Address 3431 Nappe Drive			M M / D D / Y Y Y Y		
				01 09 2007		
	City	State	Zip Code	Transaction ID: SA11A1.217566		
	Middleton	WI	53562-2373	Amount of Each Receipt this Period		
	FEC ID number of contributing	С		250.00		
	federal political committee.			200.00		
	Name of Employer	Occupation	 n	Contribution		
	Name of Employer Googins& Co . Inc	financial				
	Receipt For:		Year-to-Date ▼			
	Primary General	1 1	050.00	7		
	Other (specify)		250.00			
_	Full Name (Last, First, Middle Initial)			<b>1 5 . . . . .</b> .		
В.	Frederick J. Graboske			Date of Receipt		
	Mailing Address 101 N Van Buren St			01 08 2007		
	City	State	Zip Code	Transaction ID: SA11A1.217576		
	Rockville	MD	20850-1860	Amount of Each Receipt this Period		
	FEC ID number of contributing		1 1 1 1 1 1			
	federal political committee.	C		500.00		
				Contribution		
	Name of Employer Millican & Assoc	Occupation				
	Receipt For:	Project M	e Year-to-Date ▼	_		
	Primary General	Aggregate	rear-to-Date V	-		
	Other (specify)		500.00			
			0 0 0 0 0 0 0	-		
_	Full Name (Last, First, Middle Initial)					
C.	V. Dwight House			Date of Receipt		
	Mailing Address 608 Merrick Court			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City	State	Zip Code			
	Fayetteville	NC	28311-0326	Transaction ID: SA11A1.217782		
	•	INO	20311-0320	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		1000.00		
				Contribution		
	Name of Employer Fayetteville State Univ.	Occupation	n	Contribution		
		Teacher	Vacuta Data =	_		
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	-		
	Other (specify)		1000.00			
		0 0	0 0 0 0 0 0 0	-		
s	UBTOTAL of Receipts This Page (optional)			1750.00		
$\vdash$						
т	OTAL This Period (last page this line number	only)				

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 78 (check only one)
IT	EMIZED RECEIPTS		or each category of the	(check only one)  X 11a 11b 11c 12
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
$\rangle$	Libertarian National Committee			
۹.	Full Name (Last, First, Middle Initial) Lincoln B Hubbard			Date of Receipt
	Mailing Address 4113 W End Rd			01 09 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.217797
	Downers Grove	IL	60515-2307	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Hubbard, Broadbent & Asso-	Occupation	n ical Physicist	Contribution
	ciates LTD. Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
 3.	Full Name (Last, First, Middle Initial) Lincoln B Hubbard			Date of Receipt
	Mailing Address 4113 W End Rd			0 1 2 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.217798
	Downers Grove	<u>IL</u>	60515-2307	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		75.00
	Name of Employer Hubbard, Broadbent & Associates LTD.	Occupation Radiologi	n ical Physicist	Contribution
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		375.00	
 C.	Full Name (Last, First, Middle Initial) Daniel W. Kappes			Date of Receipt
	Mailing Address 13045 Welcome Way			0 1 1 2 2 0 0 7
	City	State	Zip Code	Transaction ID: SA11A1.217898
	Reno	NV	89511-8614	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Kappes Cassiday & Associa- tes	Occupation President		Contribution
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
S	UBTOTAL of Receipts This Page (optional)			625.00
	· · · · · · · · · · · · · · · · ·		•	
T	OTAL This Period (last page this line number on	ly)	<b>&gt;</b>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 78
	EMIZED RECEIPTS		or each category of the	(check only one)    X   11a   11b   11c   12
	-		Detailed Summary Page	13 14 15 16 17
Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
$\rangle$	Libertarian National Committee			
۹.	Full Name (Last, First, Middle Initial) RW Kerr			Date of Receipt
	Mailing Address 5339 W Mill Dr			01 / 17 / 2007
	City	State	Zip Code	Transaction ID: SA11A1.217936
	Cleveland	OH	44143-3144	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Kerr Lakeside, Inc.	Occupation President		Contribution
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	300.00	
3.	Full Name (Last, First, Middle Initial) Eric Lentz			Date of Receipt
	Mailing Address 5109 High Desert PI NE			01 31 7 2007
	City	State	Zip Code	Transaction ID: SA11A1.218100
	Albuquerque	NM	87111-9204	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer EOL Associates	Occupation Informati	n on Requested	Contribution
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
).	Full Name (Last, First, Middle Initial) Tom Lippman			Date of Receipt
	Mailing Address 263 Humboldt Rd # 16			0 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.218127
	Brisbane	CA	94005-1304	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self	Occupation Investor	1	Contribution
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1050.00
<u> </u>	OTAL This Device (last many 45% Process)	al. d	<u>`</u>	
1	OTAL This Period (last page this line number or	пу)	<b>)</b>	

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER:   PAGE 11 / 78   (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and State for commercial purposes, other than using the nan	ments may ne and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full) Libertarian National Committee			
Α.	Full Name (Last, First, Middle Initial) Matthew McNally			Date of Receipt
	Mailing Address 1101 Sequoyah Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.218294
	Enid	OK	73703-6928	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	LIC NOW	Occupation Military C		Contribution
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
В.	Full Name (Last, First, Middle Initial) Mark A. Monoscalco			Date of Receipt
	Mailing Address 430 Lewers St Apt 23D			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: SA11A1.218358
	Honolulu	HI	96815-2421	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Self Employed	Occupation Consulta		Contribution
			Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Henry O'Connor			Date of Receipt
	Mailing Address 1319 Windham Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: SA11A1.218485
	Columbus	OH	43220-3962	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Froodom Transport Inc	Occupation Manager	1	Contribution
Receipt For: Ag		Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1250.00
Н	OTAL This Period (last page this line number only			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	Check only one
Ar	y information copied from such Reports and Statements n	nay not be sold or used by any perso address of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Libertarian National Committee	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Α.	Full Name (Last, First, Middle Initial) Arjen Peirce		Date of Receipt
	Mailing Address 3001 Coleridge Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State	Zip Code	Transaction ID: SA11A1.218555
	Cleveland OH  FEC ID number of contributing federal political committee.  C	44118-3526	Amount of Each Receipt this Period  250.00
	Name of Employer Occupation Calix Sales	ion	Contribution
	Receipt For:  Primary  General  Other (specify) ▼	ate Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Wayne Allyn Root		Date of Receipt
	Mailing Address 4 Bloomfield Hills Dr	7: 0.1	01 30 2007
	City State Henderson NV	Zip Code 89052-6606	Transaction ID: SA11A1.218753  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	00002 0000	1000.00
	Name of Employer Occupation Requested Information Requested	ion ation Requested	Contribution
	Receipt For:  Primary  General  Other (specify) ▼	ate Year-to-Date ▼ 1000.00	
<u>С</u> .	Full Name (Last, First, Middle Initial) Ty Schommer		Date of Receipt
	Mailing Address 3910 Eastwind Dr		01 17 2007
	City State Anchorage AK	Zip Code 99516-3581	Transaction ID: SA11A1.218845  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	00010 0001	250.00
	Name of Employer Morgan Stanley  Occupat Vice Pt		Contribution
	Receipt For:  Primary  General  Other (specify)	ate Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)		1500.00
	OTAL This Period (last page this line number only)		

S	CHEDULE A (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 13 / 78
			Use separate schedule(s) or each category of the	(check only	one)	
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a	11b	11c 12
				13	14	15 16 17
An	y information copied from such Reports and Statemen for commercial purposes, other than using the name a	nts may	not be sold or used by any perso	on for the purp	ose of solici	ting contributions
Or	1 1 .	and add	ress or any political committee to	SOIICIL CONTIND	utions from	such committee.
/	NAME OF COMMITTEE (In Full)					
/	Libertarian National Committee					
	Full Name (Last, First, Middle Initial)					
۹.	Kenneth M. Sims			Date of	Receipt	
	Mailing Address PO Box 93893			0 1	12	2007
	City Sta	ate	Zip Code			A11A1.218922
	Las Vegas N		89193-3893			eceipt this Period
	FEC ID assessment of a section time.		111111111	7 (III) Carri	OI Edon Ho	
	federal political committee.	١.				1000.00
	Name of Familians			Contribu	ıtion	
	Southern Wine and Spirits	cupation	r Programmer			
	011101444		Year-to-Date ▼			
	Primary General	1 1		1		
	Other (specify) ▼		1000.00			
2	Full Name (Last, First, Middle Initial) Jason Snyder			Data of	Receipt	
э.	Mailing Address 113 Chestnut St			M M		/ Y Y Y Y
	Maining Addition 113 Offestitut St			0 1	17	2007
	City Sta	ate	Zip Code	Transac	tion ID: S	A11A1.218963
	<u>Philadelphia</u> PA	Α	19106-3008	Amount	of Each Re	eceipt this Period
	FEC ID number of contributing federal political committee	T '		The state of the s		250.00
	federal political committee.					200.00
	Name of Employer Occi	cupation	<u> </u>	Contribu	ıtion	
	Medical Broadcasting Comp	ative I	Director			
		gregate	Year-to-Date ▼			
	Primary General		250.00	1		
	Other (specify) ▼	0 0	200.00	1		
	Full Name (Last, First, Middle Initial)					
Э.	Nicholas Vakula			Date of	Receipt	
	Mailing Address 5235 E Cholla St			M M	/ D D	/ Y Y Y Y Y
	Cit.	-1-	Zin Oada	0 1	3 0	2007
	City Sta Scottsdale AZ	ate 7	Zip Code 85254-4718			A11A1.219194
			00204-4710	Amoun	or Each Re	eceipt this Period
	FEC ID number of contributing federal political committee.	١.				250.00
				Contribu	ıtion	
	The Vakula Law Firm D.C.	cupation	1			
	· · · · · · · · · · · · · · · · · · ·	orney	Year-to-Date ▼	_		
	Primary General	<sub>9</sub> . Jyaio		1		
	Other (specify) ▼		250.00			
						1500.00
s	UBTOTAL of Receipts This Page (optional)	·····	······			1500.00
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T	OTAL This Period (last page this line number only)		<b>)</b>			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 / 78
ITEMIZED RECEIPTS		or each category of the	(check only one)	
• •			Detailed Summary Page	X 11a 11b 11c 12
Δn	vinformation conicd from such Deports and Stateme	nto mov	not be cold or used by any perce	13 14 15 16 17
or	y information copied from such Reports and Stateme for commercial purposes, other than using the name	and add	ress of any political committee to	solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
$  \rangle$	Libertarian National Committee			
$\angle$				
	Full Name (Last, First, Middle Initial)			
Α.	Joe Vensor			Date of Receipt
	Mailing Address 1440 Cross Ridge Dr			01 05 2007
	City S	tate	Zip Code	Transaction ID: SA11A1.219211
	•	X	79912-7249	Amount of Each Receipt this Period
	EEO ID accept on a face of the state of		70012 7210	
	FEC ID number of contributing federal political committee.	:		250.00
				Contribution
	Couthwort Alloray & Acthma	cupation	1	Contribution
	Associates	ergist	·	
		gregate	Year-to-Date ▼	
	Primary General Other (specify)		250.00	
	Other (specify)	1 1	0 0 0 0 0 0 0	
_	Full Name (Last, First, Middle Initial)			+
В.	Howard Wetsman			Date of Receipt
	Mailing Address 1725 General Pershing St			M M / D D / Y Y Y Y
				01 19 2007
	•	tate	Zip Code	Transaction ID: SA11A1.219289
	New Orleans L	Α	70115-4725	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee			500.00
	federal political committee.			
	Name of Employer Occ	cupation	1	Contribution
		ysiciar	1	
	Receipt For: Ag	gregate	Year-to-Date ▼	
	Primary General	1 1	500.00	
	Other (specify) ▼		500.00	
C	Full Name (Last, First, Middle Initial) Ashton Wyllie			Date of Receipt
٥.	Mailing Address 503 Mill Brook Rd			M M / D D / Y Y Y Y
	Job Will Brook Ha			01 03 2007
	City	tate	Zip Code	Transaction ID: SA11A1.219398
	<u>Thornton</u> N	<u>IH</u>	03223-6349	Amount of Each Receipt this Period
	FEC ID number of contributing			250.00
	federal political committee.	<u>'                                    </u>		250.00
	Name of Employer	cupation	1	Contribution
	Information Doduceted	•	on Requested	
			Year-to-Date ▼	_
	Primary General			1
	Other (specify) ▼		250.00	
_				
				4000.00
S	UBTOTAL of Receipts This Page (optional)			1000.00
			<u></u> .	11475.00
T(	OTAL This Period (last page this line number only)		<b>&gt;</b>	11473.00

ITEMIZED DISBURSEMENTS		Use seperate schedule(	s)		-OR L check		UMBE	:K:			PAG	E 15/	/8
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		_	211		22 28a	П	23 28b	$\Box$	24 <b>2</b> 8c	25 29	26 30b
	y Information copied from such Reports and Stater												
or	for commercial purposes, other than using the name	ne and address of any politic	aı com	nm	iittee t	o solic	it conti	ribut	ions tr	om sı	ucn con	nmittee	
$ \rangle$	NAME OF COMMITTEE (In Full) Libertarian National Committee												
/	Libertarian National Committee												
_	Full Name (Last, First, Middle Initial)						Trans	sact	on ID	: SB2	21B.21	9533	
Α.	Advanced Mailing Services								isburs				
	Mailing Address 14970 Farm Creek Drive	9					0 <sup>M</sup> 1	М	<sup>′</sup>	5	/ L	ž 0 ŏ	7 1
	City	State Zip Code					Amou	ınt o	f Each	Disb	urseme	ent this	Period
	Woodbridge	VA 22191					Π.					2388	98
	Purpose of Disbursement  Non Candidate Party Printing/Mailing			٥	03	7	-	-		-		2000	.50
	Candidate Name		_	_	egory/	-							
				Ty	уре								
	Office Sought: House Disburs	ement For:											
	President	Primary General Other (specify)											
	State: District:	_ (1 <i>3</i> / <b>\</b>											
_	Full Name (Last, First, Middle Initial)						Trans	act	on ID	: SB2	21B.21	9535	
В.	Advanced Mailing Services							_	isburs				
	Mailing Address 14970 Farm Creek Drive	9					0 <sup>M</sup> 1	М	/ D 1	9	/ L.	žoŏ	7 <sup>Y</sup>
	City Woodbridge	State Zip Code VA 22191					Amou	ınt o	f Each	Disb	urseme	ent this	Period
	Purpose of Disbursement	VA 22191	1_									135	.77
	Non Candidate Party Printing/Mailing			0	03			_					
	Candidate Name				egory/ ype								
		ement For:											
	Senate President	Primary General Other (specify)											
	State: District:	Cure (epoemy) V											
_	Full Name (Last, First, Middle Initial)						Trans	sact	on ID	:SB2	21B.21	9439	
C.	Advanced Mailing Services, LLC								isburs				
	Mailing Address 14970 Farm Creek Drive	9					0 <sup>M</sup> 1	М	/ D	9	/ L	ž 0 ŏ	7 <sup>Y</sup>
	City Woodbridge	State Zip Code VA 22191-355	<u> </u>				Amou	ınt o	f Each	Disb	urseme	ent this	Period
	Purpose of Disbursement	VA 22191-333	J 			7						3391	.66
	Non Candidate Party Printing/Mailing		_	_	03								
	Candidate Name				egory/ ype								
	Office Sought: House Disburse	ement For:	-	- 1		$\dashv$							
	Senate	Primary General											
	President State: District:	Other (specify)											
Г	Glate. District.						_	_					
s	UBTOTAL of Disbursements This Page (optional)					<b>•</b>						5916.	41
						_			-				
ΙT	<b>OTAL</b> This Period (last page this line number only	)				▶							

ITEMIZED DISRUBSEMENTS			erate schedule(s)			OR LII check o			H:			PAG	iE 16/	/ /8
IT	EMIZED DISBURSEMENTS		category of the Summary Page		X	_	Ĺ	22 28a	П	23 28b	$\vdash$	24 [ 28c	25 29	26 30b
	y Information copied from such Reports and State													
or	for commercial purposes, other than using the nan	ne and addre	ess of any political	com	ımi	ttee to	solici	t contr	ibut	ions fr	om s	uch co	mmittee	
	NAME OF COMMITTEE (In Full)													
	Libertarian National Committee													
Α.	Full Name (Last, First, Middle Initial)										_		19441	
Λ.	Alabama Dept. of Revenue							М	_	isburs		nt / Y	YY	Y
	Mailing Address PO Box 2401							0 1		2	23	L	žoŏ	7
	City Montgomery	State AL	Zip Code 36140-2401					Amou	int o	f Each	Disb	oursem	ent this	Period
	Purpose of Disbursement	,,,_	001.10 2.101	_	_								100	.69
	AL - Withholding				00	01								
	Candidate Name					gory/ pe								
		ement For:												
	Senate President	Other (sp	General											
	State: District:	_ 0 (0p	√ V											
_	Full Name (Last, First, Middle Initial)							Trans	acti	ion ID:	: SB2	21B.2	19442	
В.	American Express Card								_	isburs		nt		
	Mailing Address PO Box 1270							0 <sup>M</sup> 1	М	<sup>/</sup> 3	3 <b>1</b>	/ LY	žoŏ	7
	City Newark	State NJ	Zip Code 07101-1270					Amou	int o	f Each	Dist	oursem	ent this	Period
	Purpose of Disbursement Credit Card (See Attached Memos)							L.	_				6450	.63
	Candidate Name					gory/ pe								
	Office Sought: House Disburs Senate President	ement For: Primary Other (sp	General ecify) ▼											
	State: District:													
C.	Full Name (Last, First, Middle Initial) American Express Card									ion ID:			19442	.1
	Mailing Address PO Box 1270							0 <sup>M</sup> 1	М	<sup>/</sup> 3	3 1	/ Y	ž o ŏ	7 Y
	City Newark	State NJ	Zip Code 07101-1270					Amou	int o	f Each	Disk	oursem	ent this	Period
	Purpose of Disbursement Credit Card Finance Charge			Г	00	)1		L.					223	.64
	Candidate Name					gory/ pe								
	Office Sought: House Disburs Senate President	ement For: Primary Other (sp	General ecify) ▼					.ivi EIV	IO I	TEM]				
	State: District:													
s	UBTOTAL of Disbursements This Page (optional)					•	•						6551	.32
Т	OTAL This Period (last page this line number only	')				•	•		Ċ					

	CHEDULE B (FEC Form 3X)	Use seperate schedule(s) (check c				E NUMBE	R:		PAG	iE 17/	78
IT 	EMIZED DISBURSEMENTS		category of the Summary Page		X 21b 27	22 28a	23 28	b E	24 28c	25 29	26 30b
	y Information copied from such Reports and Statem for commercial purposes, other than using the name										ns
$\vdash$	NAME OF COMMITTEE (In Full)										
$ \rangle$	Libertarian National Committee										
Α.	Full Name (Last, First, Middle Initial) Central Parking System						action of Disbu	_	B21B.2 ent	19442.:	2
	Mailing Address PO Box 17505 Attn: Monthly Accts Dept					0 1	M /	<sup>D</sup> 3 1	/ Y	žoŏ	7 <sup>Y</sup>
	City	State MD	Zip Code 21297-1505			Amou	nt of Ea	ch Di	sbursem	ent this	Period
	Purpose of Disbursement Parking Space Rent			Γ	001	T L.				420.	00
	Candidate Name			С	ategory/ Type		0 ITE				
	Senate President	ement For: Primary Other (spe	General <b>▼</b>			- [MEM	OHE	MJ			
_	State: District: Full Name (Last, First, Middle Initial)					Trans	action	ın· S	B21B.2	19442	3
B.	Everyones Internet					Date o	of Disbu	ırsem	ent		_
	Mailing Address 2600 Southwest Freeway Suite 500	Suite 500						3 1		ŽOŎ	7
	City Houston	State TX	Zip Code 77058			Amou	nt of Ea	ch Di	sbursem		
	Purpose of Disbursement Website Server Maintenance Candidate Name			C	001 ategory/ Type					299.	00
	Office Sought:    House   Disburse     Senate   President     State: District:	ement For: Primary Other (spe	General ecify) ▼		.,,,,	- [MEM	O ITE	M]			
C.	Full Name (Last, First, Middle Initial) Google Ad Works						action of Disbu		B21B.2 ent	19442.	4
	Mailing Address 1600 Amphitheatre Park	way				0 <sup>M</sup> 1	M /	<sup>D</sup> 3 1	/ Y	žoŏ	7 <sup>Y</sup>
	City Mt. View	State CA	Zip Code 94043-1351			Amou	nt of Ea	ch Di	sbursem		
	Purpose of Disbursement LP Branding Project Marketing				003			_		1076.	61
	Candidate Name			С	ategory/ Type	   [MEM	O ITE	MI			
	Office Sought:  Senate  President  State:  Disburse  Disburse	ement For: Primary Other (spe	General <b>▼</b>			LIVIEIVI	O III L	,			
٠	UBTOTAL of Disbursements This Page (optional)						•		•	0.	00
	OTAL This Period (last page this line number only)				·····		•	-	• •		

or for commercial purpose NAME OF COMMIT Libertarian Nation  Full Name (Last, Firs PoliticalSticker Mailing Address  City Austin Purpose of Disburse Non Candidate Party Candidate Name  Office Sought:  State: D  Full Name (Last, Firs US Postmaster	rom such Reports and Stater ses, other than using the name TEE (In Full) and Committee st, Middle Initial)  812 W 34th St	State Zip Code TX 78705-  ement For: Primary Ge	f the Page X 21 27 or used by any persolitical committee t	Transaction ID: SB21B.219442.8  Date of Disbursement  M M M D 3 1 Y Y Y Y O Y O Y  Amount of Each Disbursement this Period			
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Candidate Name  Office Sought:  State: D  Full Name (Last, First US Postmaster  Mailing Address  City Atlanta	House Disburs Senate President	Primary Ge	Category/				
State: D Full Name (Last, Firs US Postmaster Mailing Address City Atlanta	Senate President	Primary Ge	Туре	[MEMO ITEM]			
State: D Full Name (Last, Firs US Postmaster Mailing Address City Atlanta	Senate President						
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Candidate Name			Category/ Type				
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Full Name (Last, First Sheraton Hotels I				Transaction ID: SB21B.219442.10 Date of Disbursement			
Mailing Address	1111 Westchester Aven	ue		01  31			
City White Plains		State Zip Code NY 10604	е	Amount of Each Disbursement this Period			
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IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page	_	X 21b 27	22 28a	23 28b	2 2	4 8c	25 29	26 30b
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Α.	Video Monitoring Services (VMS)						of Disbur		VV	V	V
	Mailing Address 330 West 42nd Street					0 1	M / D	3 1 <sup>/</sup>	Ż	0 ŏ 7	, '
	City New York	State NY	Zip Code 10036			Amou	nt of Eac	h Disbu	ırsemen	t this F	Period
	Purpose of Disbursement	111	10030							583.3	34
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	Candidate Name				tegory/ ype						
	Office Sought: House Disburse	ement For:			<i>,</i> ,	[MEM	O ITEM	1]			
	Senate President	Primary Other (spe	General								
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_	Full Name (Last, First, Middle Initial)					Trans	action II	<b>D:</b> SB2	1B.219	445	
В.	American National Insurance Co.						of Disbur				
	Mailing Address Attn: Lea Pollack P. O. Box 1830 - Pensior				0 <sup>M</sup> 1	M / D	31	ž	0 ŏ 7	, <sup>Y</sup>	
	City Galveston	State TX	Zip Code 77550-1830			Amou	nt of Eac	h Disbu	ırsemen	t this F	Period
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	State: District:	Curor (ope	,⊙y) <b>∀</b>								
С.	Full Name (Last, First, Middle Initial)						action II		1B.219	446	
Ο.	Anthem Blue Cross Blue Shield						of Disbur		YY	Y	Y
	Mailing Address PO Box 79127					0 1	II L	25 <sup>D</sup>	2	0 Ď 7	
		State	Zip Code			Amou	nt of Eac	h Disbu	irsemen	t this F	Period
	Baltimore Purpose of Disbursement	MD	21279-1273	_						618.7	75
	Employee Health Insurance				001						
	Candidate Name				tegory/ ype						
	Office Sought: House Disburse	ement For:									
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NAME OF COMMITTEE (In Full)											
Libertarian National Committee											
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A. BentleyForbes Watergate LLC				Da		Disburse	D /	ΥΫ́Υ	Y	Υ	
Mailing Address PO Box 73378				0	1	0	1	2	0 Ď 7		
City Cleveland	State Zip Code OH 44193-3378			An	ount	of Each	Disburse	emen	this P	erio	t
Purpose of Disbursement	44195-5576			$+$ $\Gamma$				9	138.7	'3	П
Office Rent Expense		00	)1					_	-		
Candidate Name		Cate Ty	gory/ pe								
	ement For:										
Senate   President	Primary General Other (specify) ▼										
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Full Name (Last, First, Middle Initial)				Tra	nsac	tion ID:	SB21B	219	536		
3. Blackbaud				Da	te of [	Disburse	ement				
Mailing Address P.O. Box 930256				O <sup>M</sup>		<sup>′</sup> 0	5 /	ž	0 ŏ 7	Y	
City	State Zip Code			An	ount	of Each	Disburse	emen	this P	erio	k
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Purpose of Disbursement Annual Software Maintainance Fees	I	00	)1						210.2	.0	_
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ÿ	ement For:										
Senate President	Primary General Other (specify)										
State: District:	Other (specify)										
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Louise Calise						Disburse					
Mailing Address 6802 Dante Court				0		<sup>/</sup> 1	0 /	ž	0 ŏ 7	Y	
City	State Zip Code			An	ount	of Each	Disburse	emen	this P	erio	t
Springfield Purpose of Disbursement	VA 22152-3328			-				1	239.8	1	٦
Employee Net Pay	I	00	)1							-	_
Candidate Name		Cate Ty	gory/ pe								
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Senate	Primary General										
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name											s
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۹.	Full Name (Last, First, Middle Initial) Louise Calise							sburse				Y
	Mailing Address 6802 Dante Court					0 1		<sup>D</sup> 2	4	2	0 ŏ 7	7
	Springfield	State VA	Zip Code 22152-3328			Amo	unt of	Each	Disburse			
	Purpose of Disbursement Employee Net Pay Candidate Name			Ca	001 ategory/			•		. 1	239.	79
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼		Туре							
3.	Full Name (Last, First, Middle Initial) Commonwealth Digital Office Solutions							on ID:	SB21B.			V
	Mailing Address 21205 Ridgetop Circle					0 1	, ivi	0	5 /	2	0 ŏ 7	<u>'</u>
	•	State VA	Zip Code 20166-6501			Amo	unt of	Each	Disburse			
	Purpose of Disbursement Copier Maintenance Candidate Name			Ca	001 ategory/ Type	L.					297.	56
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼									
Э.	Full Name (Last, First, Middle Initial) Shane Cory					Date	of Dis	sburse				
	Mailing Address 5 Burwell Place					0 <sup>M</sup> 1	M /	<sup>D</sup> 1	0 /	ž	0 ŏ 7	7 <sup>Y</sup>
		State VA	Zip Code 22554			Amo	unt of	Each	Disburse	men	t this F	Period
	Purpose of Disbursement Employee Net Pay			Г	001	L.				2	567.	46
	Candidate Name				ategory/ Type							
	Office Sought: House Senate President State: District:	ment For: Primary Other (spe	General cify) ▼									
s	UBTOTAL of Disbursements This Page (optional) .				▶					4	104.8	31
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	y Information copied from such Reports and State for commercial purposes, other than using the nan														ns
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$ \rangle$	Libertarian National Committee														
<b>′</b> А.	Full Name (Last, First, Middle Initial) Shane Cory							Trans		on ID			3.219	9461	
								M	_		2 4		Υ <u>)</u>	/ <u>Y</u>	_ Y
	Mailing Address 5 Burwell Place							0 1			24	l L	2	o ŏ	7
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	Purpose of Disbursement Employee Net Pay			Γ	00	)1	1						2	2567.	48
	Candidate Name			С		gory/	1								
	Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General ecify) ▼		-,	<u> </u>									
	State: District:														
В.	Full Name (Last, First, Middle Initial) Cory Consulting							Trans Date		on ID	_		3.219	9541	
	Mailing Address 325 Garrisonville Road	Suite 106						0 <sup>M</sup> 1	М	/ D	5	/	Ý	o ŏ	7 <sup>Y</sup>
	ty State Zip Code :afford VA 22554							Amou	ınt o	f Each	n Dis	sburs	emer	nt this	Period
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	Purpose of Disbursement Internet-List Services & Server Maint.			Г	00	)1				-	•		-		
	Candidate Name			С	ate	gory/ pe									
	Office Sought:  Senate  President  State:  Disburs	ement For: Primary Other (spe	General ecify) ▼												
	Full Name (Last, First, Middle Initial)							Trans	act	on ID	. 01	201B	210	7/63	
C.	DC Office of Tax & Revenue							Date		isburs	eme				V
	Mailing Address 941 North Capitol St, NI	E 6th Flr						0 1	IVI		2 3	ľL	2	0 0	7 '
	City Washington							Amou	int o	f Each	n Dis	sburs	emer	nt this	Period
	Purpose of Disbursement DC - Admin. Funding Assessment			Г	00	)1	1	<u></u>						22.	77
	Candidate Name			С	_	gory/	1								
	Office Sought:  House Senate President State:  Disburs	ement For: Primary Other (spe	General ecify) ▼		- 1	•									
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Libertarian National Committee										
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DC Office of Tax & Revenue					of Disk м /			/ · · ·	V ° V	
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City Washington	State Zip Code DC 20002			Amou	int of E	ach D	isburse	ment t	his Pe	riod
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DC - Unemployment Company		00	1							
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President	Other (specify)									
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DC - Withholding Candidate Name		00 Categ								
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	ement For:									
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Mailing Address PO Box 41601				0 1		0 5			ŏ7Ť	
City Philadelphia	State Zip Code PA 19101-1601			Amou	ınt of E	ach D	isburse	ment t	his Pe	riod
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or	for commercial purposes, other than using the nan	ne and address	s of any political	com	ımıt	tee to soil	CIT COUL	ibut	ions ir	om st	ich con	ımıttee	
$\rangle$	NAME OF COMMITTEE (In Full) Libertarian National Committee												
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	Mailing Address PO Box 41601						0 1	IVI	′	5	′ <u> </u>	ž o ŏ	7
	City Philadelphia	State PA	Zip Code 19101-1601				Amou	int o	f Each	Disb	urseme	ent this	Period
	Purpose of Disbursement					-						147.	66
	Copier Lease				00								
	Candidate Name				Typ	jory/ e							
	Office Sought: House Disburs Senate	ement For: Primary	General										
	President	Other (spec	cify) 🔻										
_	State: District:												
В.	Full Name (Last, First, Middle Initial) Susan M Dickson								on ID:		21B.21 t	9469	
	Mailing Address 3410 Vineland Place						0 <sup>M</sup> 1	М	/ D	0	/ Y	ž 0 ŏ	7 <sup>Y</sup>
	City Dumfries		Amou	int o	f Each	Disb	urseme	ent this	Period				
	Purpose of Disbursement Employee Net Pay				00	1						844.	96
	Candidate Name			Ca	-	jory/							
	Senate President	ement For: Primary Other (spec	General cify) ▼										
	State: District: Full Name (Last, First, Middle Initial)											- ·	
C.	Susan M Dickson						Date	of D	isburs	emen			
	Mailing Address 3410 Vineland Place						0 <sup>M</sup> 1	М	<sup>/</sup> 2	2 4	/ L	ž 0 ŏ	7 <sup>*</sup>
	City Dumfries	State VA	Zip Code 22026				Amou	int o	f Each	Disb	urseme	ent this	Period
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s	UBTOTAL of Disbursements This Page (optional)	<u> </u>	<u></u>			<u> </u>						1837.	58
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SCHEDULE B (FECFOIIII 3X)	Use seperate schedule(s)	FOR LINE (check only			PAG	iE 25/7	78
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NAME OF COMMITTEE (In Full) Libertarian National Committee	7.						
Full Name (Last, First, Middle Initial) Paula Edwards, CPA  Mailing Address 1318 Roxanna Road NW				tion ID: S Disbursem	nent	19546 Ž 0 0 7	, <sup>Y</sup>
City Washington	State Zip Code DC 20012		Amount	of Each D	isbursem		
Purpose of Disbursement FEC Filing and Repair of Files Candidate Name		001 Category/ Type				2000.0	00
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)						
Full Name (Last, First, Middle Initial)  Financial Agent Federal Tax Deposit			Date of I	tion ID: S Disbursem	nent		V
Mailing Address PO Box 970030			01	0 9	) / Y	ž 0 ŏ 7	, <sup>Y</sup>
City St. Louis Purpose of Disbursement	State         Zip Code           MO         63197-0030		Amount	of Each D	isbursem	ent this F	
Federal Withholding Candidate Name		001 Category/ Type					
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)						
Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit			Date of I	tion ID: S Disbursem	nent		
Mailing Address PO Box 970030			01	0 9		ž 0 ŏ 7	, <sup>Y</sup>
City St. Louis	State         Zip Code           MO         63197-0030		Amount	of Each D	isbursem	ent this F	
Purpose of Disbursement Medicare Company Candidate Name		001 Category/ Type				104.2	_4
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)						3281.2	24
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$ \rangle$	NAME OF COMMITTEE (In Full) Libertarian National Committee												
<u></u>	Full Name (Last, First, Middle Initial)						Trans	sact	ion ID	SB2	1B.21	9480	
A.	Financial Agent Federal Tax Deposit						Date	of D	isburs	ement	– . – .	J-100	
	Mailing Address PO Box 970030						0 <sup>M</sup> 1	М	<sup>′</sup>	9 9	Y	ž 0 Ď	7 <sup>Y</sup>
	City St. Louis		Code 3197-0030				Amou	ınt o	f Each	Disb	urseme	nt this	Period
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	Senate President	sement For: Primary Other (specify)	General										
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В.	Full Name (Last, First, Middle Initial) Financial Agent Federal Tax Deposit						Date	of D	isburs	ement			V
	Mailing Address PO Box 970030						0 <sup>M</sup> 1	М	<sup>′</sup>	9 9	Y	žoŏ	7 1
	City St. Louis		Code 3197-0030				Amou	ınt o	f Each	Disb	urseme		
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	Candidate Name			Ca	-	gory/							
	Senate President	sement For: Primary Other (specify)	General ▼										
_	State: District:  Full Name (Last, First, Middle Initial)						<b>T</b>		ID	000	4D 04	0404	
C.	Financial Agent Federal Tax Deposit						Date		isburs				Y
	Mailing Address PO Box 970030						0 1			9		ž 0 ŏ	7
	City St. Louis		Code 3197-0030				Amou	ınt o	f Each	Disb	urseme		
	Purpose of Disbursement Social Security Employee				00	1		-	_		-	702.	25
	Candidate Name			Ca	_	gory/							
	Senate President	sement For: Primary Other (specify)	General ▼										
	1							_				1568.	74
Ls	UBTOTAL of Disbursements This Page (optional	)					<u> </u>	-	•			1000.	14
т	OTAL This Period (last page this line number only	y)				•							

	CHEDULE B (FEC Form 3X)	Use sep	Use seperate schedule(s) FOR LINE NUMBER: (check only one)			PAGE 27/78
IT	EMIZED DISBURSEMENTS		category of the Summary Page	X 21b 27	22 2	23 24 25 26 28b 28c 29 30b
	y Information copied from such Reports and State for commercial purposes, other than using the na					
	NAME OF COMMITTEE (In Full) Libertarian National Committee		, р			
<u></u>	Full Name (Last, First, Middle Initial)				<b>T</b>	- ID ODO4D 040475
Α.	Financial Agent Federal Tax Deposit				Date of Disk	
	Mailing Address PO Box 970030				0 1	
	City St. Louis	State MO	Zip Code 63197-0030		Amount of E	Each Disbursement this Period
	Purpose of Disbursement Federal Unemployment			001		91.05
	Candidate Name			Category/ Type		
	Office Sought: House Disbur Senate President State: District:	sement For: Primary Other (spe	General ecify) ▼			
_	Full Name (Last, First, Middle Initial)				<b>T</b>	- ID ODO4D 040477
В.	Financial Agent Federal Tax Deposit				Date of Disk	n <b>ID:</b> SB21B.219477 oursement
	Mailing Address PO Box 970030				01	$\begin{bmatrix} \begin{smallmatrix} D \\ 2 \end{smallmatrix} \begin{smallmatrix} 3 \end{smallmatrix} \end{bmatrix} \ \begin{smallmatrix} Y \\ \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} 0 \end{smallmatrix} \begin{smallmatrix} Y \\ 7 \end{smallmatrix} $
	City St. Louis	State MO	Zip Code 63197-0030		Amount of E	Each Disbursement this Period
	Purpose of Disbursement Federal Withholding			001		1103.00
	Candidate Name			Category/ Type		
	Senate President	sement For: Primary Other (spe	General ecify) ▼			
	State: District:  Full Name (Last, First, Middle Initial)					
C.	Financial Agent Federal Tax Deposit				Transaction Date of Disk	
	Mailing Address PO Box 970030				0 1	D 2 3 Y 2 0 0 7 Y
	City St. Louis	State MO	Zip Code 63197-0030		Amount of E	Each Disbursement this Period
	Purpose of Disbursement Medicare Company			001		165.02
	Candidate Name			Category/ Type		
	Office Sought: House Disbur Senate President State: District:	sement For: Primary Other (spe	General ecify) ▼			
	oraro. District.					1050.07
s	UBTOTAL of Disbursements This Page (optional	l)		<u>\</u>		1359.07
T .	OTAL This Period (last page this line number onl	y)				

	CILEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)				)R LINE heck onl		:H:			PAGE	28 /	/8
IT	EMIZED DISBURSEMENTS	for each catego Detailed Summ			X		22 28a	П	23 28b	$oldsymbol{\sqcup}$	24 28c	25 29	26 30b
	y Information copied from such Reports and State												ns
or	for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)	ne and address of a	any political	com	mıı	tee to so	licit conti	ribut	ions tr	om su	icn com	mittee	
$ \rangle$	Libertarian National Committee												
_	Full Name (Last, First, Middle Initial)						Trans	sact	ion ID:	:SB2	1B.21	9481	
Α.	Financial Agent Federal Tax Deposit							_	isburs				V
	Mailing Address PO Box 970030						0 <sup>M</sup> 1	IVI	້	23		ž 0 Ď	7 '
	City St. Louis		Code 197-0030				Amou	ınt o	f Each	Disb	urseme	nt this	Period
	Purpose of Disbursement	IVIO 631	197-0030	_								165.	02
	Medicare Employee				00	1					-		
	Candidate Name				teç Typ	gory/ be							
	Office Sought: House Disburs Senate President	Primary Other (specify)	General ▼										
	State: District:												
В.	Full Name (Last, First, Middle Initial)								-		1B.21	9483	
٥.	Financial Agent Federal Tax Deposit							of D	isburs			Y Y	Υ
	Mailing Address PO Box 970030	State Zip Code							2	23		žoŏ	7
	City St. Louis	State Zip Code Louis MO 63197-0030										nt this	Period
	Purpose of Disbursement Social Security Company				00							705.	62
	Candidate Name			Са	00 ateg Typ	gory/							
	Office Sought: House Senate President State: District:	sement For: Primary Other (specify)	General										
_	Full Name (Last, First, Middle Initial)						Trans	2001	ion ID	CDO	1B.21	0405	
C.	Financial Agent Federal Tax Deposit						Date	of D	isburs	ement	1		_
	Mailing Address PO Box 970030						0 <sup>M</sup> 1	М	<sup>/</sup> 2	23	Y	ž 0 Ď	7 <sup>Y</sup>
	City St. Louis		Code 197-0030				Amou	ınt o	f Each	Disb	urseme	nt this	Period
	Purpose of Disbursement Social Security Employee				00	4						705.	62
	Candidate Name			Са	_	gory/							
	Senate President	sement For: Primary Other (specify)	General										
Г	State: District:						_						-
s	UBTOTAL of Disbursements This Page (optional	)					<u></u>	_	-			1576.	26
Т	OTAL This Period (last page this line number only	y)				•	L.						

SCHEDOLL B (I LOT OTHI 5X)	Use seperate schedule(s)		OR LINE check only		:H:			PAGE	: 29 /	/8
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	- <u>-</u>	22 28a	$\vdash$	23 28b	24		25 29	26 30b
Any Information copied from such Reports and State										
or for commercial purposes, other than using the nar  NAME OF COMMITTEE (In Full)	ne and address of any political	commi	ittee to soil	CIT COUL	ributio	ons ire	om suc	n com	ımıttee	
Libertarian National Committee										
Zissitanan valienai seimintiss										
Full Name (Last, First, Middle Initial)  A. FP Mailing Solutions							SB21	B.219	9548	
A. FP Mailing Solutions					of Dis	sburse		Y	y y	Υ
Mailing Address Dept 4272				0 1		0	5	2	ž 0 Ŏ	7
City	State Zip Code			Amou	ınt of	Each	Disbu	rsemer	nt this	Period
Carol Stream	IL 60122-4272							-	63.	45
Purpose of Disbursement Postage Meter Resets		00	03		-				,	
Candidate Name		Cate	gory/							
000		Ту	pe							
Office Sought: House Disburs	sement For:  Primary General									
President	Other (specify) ▼									
State: District:										
Full Name (Last, First, Middle Initial) <b>B.</b> EP Mailing Solutions							SB21	B.219	9487	
B. FP Mailing Solutions					of Dis	sburse	ement	Y	y y	Υ
Mailing Address Dept 4272				0 1	,	3	1 ′		žoŏ	7 '
City Carol Stream	State Zip Code IL 60122-4272			Amou	ınt of	Each	Disbu	rsemer	nt this	Period
Purpose of Disbursement	00122 4272								583.	.60
Postage & Meter Resets		QC	01							
Candidate Name		Cate Ty	gory/ pe							
ÿ	ement For:									
Senate   President	Primary General Other (specify) ▼									
State: District:	Other (specify)									
Full Name (Last, First, Middle Initial)				Trans	actio	on ID:	SB21	B.219	9549	
C. FP Mailing Solutions						sburse				
Mailing Address Dept 4272				0 <sup>M</sup> 1	M /	<sup>D</sup> 3	1	2	ž 0 Ŏ	7 <sup>Y</sup>
City Carol Stream	State Zip Code IL 60122-4272			Amou	ınt of	Each	Disbui	rsemer	nt this	Period
Purpose of Disbursement Postage Meter Resets		00	01	L.					16.	40
Candidate Name		_	gory/							
Office Sought: House Disburs	ement For:									
Senate	Primary General									
President State: District:	Other (specify)									
2.30.00.					-	-				'
SUBTOTAL of Disbursements This Page (optional			<u> </u>						663.	45
TOTAL This Period (last page this line number only	r)		•							

SCHEDULE B (FEC Form 3X)	Use sepe	erate schedule(s)		FOR LINE NUMBER: PAGE 30 / 78 (check only one)								
TEMIZED DISBURSEMENTS	for each	category of the Summary Page	1-	21b 27	22 28a		23 28b	24 28c	В	25 29	26 30k	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam											s	
NAME OF COMMITTEE (In Full) Libertarian National Committee												
Full Name (Last, First, Middle Initial)  Nicole M Giancursio						of Di	sburse		.219	488		
Mailing Address 1435 N St NW Apt 104 Washington, DC 20005					0 <sup>M</sup> 1	M	1	0 /	ž Ž	0 ŏ 7	Y	
City Washington	State DC	Zip Code 20005			Amo	unt of	Each	Disburse	ement	this F	Period	
Purpose of Disbursement Employee Net Pay			Ç	001						497.4	40	
Candidate Name				egory/ ype								
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General cify) ▼										
Full Name (Last, First, Middle Initial)  Nicole M Giancursio							on ID:	SB21B ement	.219	489		
Mailing Address 1435 N St NW Apt 104 Washington, DC 20005					0 <sup>M</sup> 1	M	2	24	ž	0 ŏ 7	, <sup>Y</sup>	
City Washington	State DC	Zip Code 20005			Amo	unt of	Each	Disburse				
Purpose of Disbursement Employee Net Pay Candidate Name			Cat	001 egory/					•	394.4	42	
Office Sought:  Senate President  State:  Disburse	ement For: Primary Other (spe	General										
Full Name (Last, First, Middle Initial) Stephen P Gordon							on ID:	SB21B ement	.219	491		
Mailing Address 508 Short Street SE Hartselle, AL 35640					0 <sup>M</sup> 1	М	<sup>D</sup> 1	0 /	ž	0 ŏ 7	, <sup>Y</sup>	
City Hartselle	State AL	Zip Code 35640			Amo	unt of	Each	Disburse	ement	this F	Period	
Purpose of Disbursement Employee Net Pay			Ç	001					2	037.8	39	
Candidate Name				egory/ ype								
Senate President	ement For: Primary Other (spe	General cify) ▼										
State: District:  SUBTOTAL of Disbursements This Page (optional)						•			29	929.7	71	
TOTAL This Period (last page this line number only)				<u> </u>	F	-						

SCILDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)			R LINE NUMBER: PAGE 31 / / eck only one)							_
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X		22 28a	Н	23 28b	24 28c	П	25 29	26	
Any Information copied from such Reports and State											
or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)	e and address of any political co	mmit	tee to s	olicit con	ribut	ions tro	m sucn	comn	nittee		_
Libertarian National Committee											
Full Name (Last, First, Middle Initial)				Tran	sacti	on ID:	SB21B	.219	492		
Stephen P Gordon					of D	isburse		v v		V	
Mailing Address 508 Short Street SE Hartselle, AL 35640				0 <sup>M</sup> 1		<sup>'</sup> 2	4 ′	2	0 ŏ 7		
City Hartselle	State Zip Code AL 35640			Amo	unt o	f Each	Disburs	emen	t this P	eriod	
Purpose of Disbursement			-	T L.				, 2	037.8	8	
Employee Net Pay Candidate Name		00									
Candidate Name		Categ Typ									
Office Sought: House Disburs Senate President	ement For:  Primary  General  Other (specify)										
State: District:	Other (specify)										
Full Name (Last, First, Middle Initial)				Tran	sacti	on ID:	SB21B	.219	551		_
Great American Leasing				Date	of D	isburse	ment				
Mailing Address 8742 INNOVATION WA	Υ			0 <sup>M</sup> 1	М	0	5 /	ž	0 ŏ 7	Y	
City CHICAGO	State         Zip Code           IL         60682-0087			Amo	unt o	f Each	Disburs	emen			
Purpose of Disbursement Postage Meter Lease	lΓ	00	1	L.	-				96.6	3	
Candidate Name		Categ Typ	ory/								
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)										
Full Name (Last, First, Middle Initial)				Tran	cacti	on ID:	SB21B	210	105		_
Sean Haugh						isburse		.219	433		
Mailing Address 1821 Hillandale Rd				0 <sup>M</sup> 1	М	0	5 /	Ý Ž	0 ŏ 7	Y	
City Durham	State         Zip Code           NC         27705-2659			Amo	unt o	f Each	Disburs	emen	t this P	eriod	Ξ
Purpose of Disbursement	27765 2665			† L.				1	200.0	0	
Consulting Services - Candidate Tracker  Candidate Name		00 Categ Typ	ory/								
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)										
SUBTOTAL of Disbursements This Page (optional)			<b>•</b>					3	334.5	1	
TOTAL This Period (last page this line number only	)										
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<b>[</b> ]	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1-	21b 27	Á	22 28a	23		24 28c		25 29	П	26 30b
An	y Information copied from such Reports and Stat	 ements mav not be sold or use	L d by a		n for					ontri		$\coprod_{s}$	300
	for commercial purposes, other than using the na												
\	NAME OF COMMITTEE (In Full)												
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	Full Name (Last, First, Middle Initial)				Ι.	Transa	ction	ID: S	SB21B.	.219	553		
۱.	Joe Ragan's					Date of				/ · v	· · · · · ·	V	
	Mailing Address PO Box 125					0 1	]	0	5	2	0 Ď 7		
	City Soringfield	State Zip Code VA 22150-0125				Amour	nt of Ea	ach [	Disburse	men	t this F	erio	d
	Soringfield Purpose of Disbursement	VA 22150-0125	) 								158.1	0	
	Office Supplies			001						_	-	-	
	Candidate Name			egory/ ype									
	Office Sought: House Disbu	rsement For:											
	Senate	Primary General											
	State: President  State: District:	Other (specify)											
	Full Name (Last, First, Middle Initial)				+				00010				
3.	Robert S Kraus					Date o	f Disbu	ırseı					
	Mailing Address 5375 Duke Street Apt 905					01	']	<sup>D</sup> 1	o '	Ž	0 Ď 7	Y	
	City Alexandria	State Zip Code VA 22304				Amour	nt of Ea	ach [	Disburse	men	t this F	erio	d
	Purpose of Disbursement Employee Net Pay			001						. 1	280.5	59	
	Candidate Name			egory/ ype									
	Senate President	rsement For: Primary General Other (specify)	•										
	State: District:												
Э.	Full Name (Last, First, Middle Initial) Robert S Kraus					<b>Transa</b> Date o			SB21B. ment	.219	499		
	Mailing Address 5375 Duke Street Apt 905					0 1 N	/	<sup>D</sup> 2	4 /	Ž	0 ŏ 7	Y	
	City	State Zip Code				Amour	nt of Ea	ach [	Disburse	men	t this F	erio	d
	Alexandria Purpose of Disbursement	VA 22304	Ι							1	280.5	58	
	Employee Net Pay			001				,			-	_	
	Candidate Name			egory/ ype									
	Senate	rsement For: Primary General	•										
	State: President District:	Other (specify)											
								_	-		710 0	7	$\overline{}$
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T	OTAL This Period (last page this line number on	lv)											

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	EMIZED DISBURSEMENTS		category of the Summary Page	1 –	21b 27	Á	22 28a		23 28b	24 28c	F	25 29	П	26 30b
	y Information copied from such Reports and Stater				ny persor		the pur		e of so	licating of		ibutions	5	
or f	or commercial purposes, other than using the name	e and addres	ss of any political o	omm	nittee to s	solici	t contri	buti	ons fro	m such	comr	nittee		
	NAME OF COMMITTEE (In Full)													
/	Libertarian National Committee													
	Full Name (Last, First, Middle Initial)						Transa	actio	on ID:	SB21B	.219	570		
۸.	Libertarian Students.org						Date o	of Dis			V - V	· · ·	V	
	Mailing Address 260 Albert Court						0 1	,	0	5 /	2	0 ŏ 7		
	City	State	Zip Code				Amour	nt of	Each	Disburse	emen	t this F	erio	t
	Charlottesville Purpose of Disbursement	VA	22901				T.	-				500.0	00	
	Web Site Development			0	01		-	-			-			
	Candidate Name				egory/									
				T	уре									
		ement For:												
	Senate President	Primary Other (spe	General											
	State: District:	_ Other (spe	city) $\blacktriangledown$											
	Full Name (Last, First, Middle Initial)						Tranes	actio	an ID:	SB21B	210	1502		
3.	MAMSI - UnitedHealth (WFG)						Date o		sburse	ement	.213	JUZ		
	Mailing Address PO Box 42924						0 1 h	<b>M</b> /	0	<sup>D</sup> /	Ý Ž	0 ŏ 7	Υ	
	City	State	Zip Code				Amour	nt of	Each	Disburse	emen	t this F	erio	t
	Philadelphia	PA	19101-2924									000	_	
	Purpose of Disbursement Employee Health Insurance			0	01			-		-	-	266.1	2	
	Candidate Name			_	egory/									
					ype									
	* H	ement For:												
	Senate	Primary	General											
	State: President	Other (spe	city) 🔻											
	Full Name (Last, First, Middle Initial)						Trans	acti	on ID:	SB21B	210	502		
Э.	Merchant Services						Date o				.213	505		
	Moiling Address COO M						0 1 N	M /	Da	D /	Ϋ́Ϋ́Υ	0 ŏ 7	Υ	
	Mailing Address 890 Mountain Ave						0 1	_				007		
	City	State	Zip Code				Amour	nt of	Each	Disburse	emen	t this F	erio	t
	New Providence Purpose of Disbursement	NJ	07974-0000								1	1198.5	59	
	EOM -Merch Servc Fees			Q	01									
	Candidate Name				egory/ ype									
	Office Sought: House Disburse	ement For:		•	,,,,	$\dashv$								
	Senate	Primary	General											
	President	Other (spe	cify)											
	State: District:													
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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 <u>`</u>	1b [	22 28a	$\boldsymbol{\sqcup}$	23 28b	24 28c	H	25 29	26	
Any Information copied from such Reports and State or for commercial purposes, other than using the nar											
or for commercial purposes, other than using the har NAME OF COMMITTEE (In Full)	ie and address of any political co	JIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	เบ รับไ	CIL COLIT	וטענוטו	115 110	ii Sucii	COITIIT	iillee		_
Libertarian National Committee											
Full Name (Last, First, Middle Initial)				Trans	actio	n ID: S	SB21B	.219	507		
Samuel (LLS) New				Date	of Disl м /			v v	V	v	
Mailing Address 1227 1/2 Massachusett	S Ave., SE			0 <sup>M</sup> 1	,	0	5 ′	2	0 ŏ 7		
City	State Zip Code DC 20003			Amou	int of E	Each [	Disburs	ement	this P	eriod	
Washington Purpose of Disbursement	DC 20003								900.0	0	
LLS Consulting Services		001				-		_			
Candidate Name		Category Type	//								
Office Sought: House Disburs Senate	ement For: Primary General										
President	Other (specify)										
State: District:  Full Name (Last, First, Middle Initial)											—
Postmaster				Trans Date of			SB21B ment	.219	512		
Mailing Address US Post Office Waterga	te			0 <sup>M</sup> 1	M /	<sup>D</sup> 0	8 /	ž ž	0 ŏ 7	Y	
2500 virginia Ave NW City	State Zip Code			Атоп	int of F	=ach [	Disburse	ement	this P	eriod	_
Washington	DC 20037			711100			313501131				
Purpose of Disbursement BRE/BRM Postage Acct # BR 1383-002		001					-		500.0	0	
Candidate Name		Category Type	//								
Senate President	ement For: Primary General Other (specify)										
State: District: Full Name (Last, First, Middle Initial)							20210				_
Postmaster - Walton Press				Date		burser				V	
Mailing Address Walton Press 402 Mavfield Dr				0 1	,	<sup>D</sup> 1	9 ′	2	0 ŏ 7		
City Monroe	State Zip Code GA 30655			Amou	int of E	Each [	Disburs				
Purpose of Disbursement Posatge Expense -		001						2	063.1	2	
Candidate Name		Category Type	//								
Office Sought: House Disburs Senate President State: District:	ement For:  Primary General  Other (specify) ▼										
SUBTOTAL of Disbursements This Page (optional			•		*		•	34	163.1	2	_
			_								
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ıſ	EMIZED DISBURSEMENTS	for each catego Detailed Summ			_	Á	22 28a	_	23 28b	24 28c	P	25 29	П	26 30b
	y Information copied from such Reports and Staten												5	
or	for commercial purposes, other than using the nam	e and address of a	iny political co	mmi	ttee to s	olicit	contril	butio	ns fro	m such o	comr	nittee		
\	NAME OF COMMITTEE (In Full)													
/	Libertarian National Committee													
	Full Name (Last, First, Middle Initial)						Transa	actio	n ID:	SB21B	.219	515		
٦.	QuickBooks Payroll Service						Date of	f Dis			/ · V	· V	V	
	Mailing Address PO Box 30015						0 1		0	9	2	0 0 7		
	City		Code				Amour	nt of I	Each	Disburse	emen	t this P	erio	d
	Reno Purpose of Disbursement	111 090	520-3015   _			-				-		95.7	70	
	Payroll Processing Fee			00	)1			0	-		0		-	
	Candidate Name				gory/									
	Office Courses   Dishure	ement For:		Ту	pe	_								
	Office Sought: House Disburse Senate	Primary	General											
	President	Other (specify)	▼											
	State: District:													
3.	Full Name (Last, First, Middle Initial)									SB21B	.219	516		
-	QuickBooks Payroll Service						Date of	_			ΥΥ	Y	Υ	
	Mailing Address PO Box 30015						0 1	]	<sup>D</sup> 2	3	2	0 ŏ 7		
	City Reno		Code 520-3015				Amour	nt of I	Each	Disburse	emen	t this P	erio	d
	Purpose of Disbursement	110 093	20-3013			+						20.3	36	
	Payroll Processing Fee			00	01									
	Candidate Name			Cate Ty	gory/ pe									
	ÿ	ement For:	0											
	Senate President	Primary Other (specify)	General											
	State: District:	Care (openly)	•											
_	Full Name (Last, First, Middle Initial)						Transa	actio	n ID:	SB21B	.219	555		
٠.	Steve Rosa						Date o	_		ment			1/	
	Mailing Address 4829 West Braddock Ro	ad, Apt 3					01		0	5 /	ž	0 0 7	Y	
	City Alexandria	State Zip 0 VA 223	Code 311				Amour	nt of I	Each	Disburse	emen	t this P	erio	d
	Purpose of Disbursement LP Stationery Desktop Publishing				20		L.					70.0	00	
	Candidate Name			00 Cate	gory/									
				Ту										
		ement For:	٠.											
	Senate President	Primary Other (specify)	General											
	State: District:	Julio (Specify)	▼											
	1					-					_	100.0		$\overline{}$
S	<b>UBTOTAL</b> of Disbursements This Page (optional)										0	186.0	6	
т	OTAL This Period (last page this line number only)				•							-		

S	CHEDULE B (FEC Form 3X)	FOR LINE		F	AGE 36/	78		
IT	EMIZED DISBURSEMENTS	for each c	rate schedule(s) ategory of the summary Page	(check only 21b 27	one) 22 28a	23 24 28b 28c	25 29	26 30b
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam							
$\rangle$	NAME OF COMMITTEE (In Full) Libertarian National Committee							
١.	Full Name (Last, First, Middle Initial) Steve Rosa					ion ID: SB21E		Y
	Mailing Address 4829 West Braddock Ro	ad, Apt 3			0 1	05	žoŏ	7
	City Alexandria	State VA	Zip Code 22311		Amount o	of Each Disburs		
	Purpose of Disbursement LP Stationery Desktop Publishing Candidate Name			001			157	.50
		ement For: Primary Other (spec	General €	Category/ Type				
3.	Full Name (Last, First, Middle Initial) Studio Designs Printing Co  Mailing Address P.O. Box 845					ion ID: SB21E isbursement	3.219558 <sup>°</sup> <sup>2</sup> 0 0	7 <sup>Y</sup>
	City Milledgeville Purpose of Disbursement Non Candidate Party Printing/Mailing Candidate Name	State GA	Zip Code 31059-0845	003 Category/ Type	Amount o	of Each Disburs	sement this	
	Office Sought:  Senate President  State:  Disburs:	ement For: Primary Other (spec	General	71.				
Э.	Full Name (Last, First, Middle Initial) Target America					ion ID: SB21E isbursement	3.219521	
	Mailing Address 10560 Main Street, Ste	#301			01	04	y žoó	7 <sup>Y</sup>
	City Fairfax	State VA	Zip Code 22030		Amount o	of Each Disburs		
	Purpose of Disbursement LNC Party Donor Prospect Program Non Ca Candidate Name			003 Category/ Type			6500	.00
	Office Sought:    House   Disburs	ement For: Primary Other (spec	General <b>▼</b>					
s	UBTOTAL of Disbursements This Page (optional)						7457.	50
	OTAL This Period (last page this line number only							

## SCHEDULE B (FEC Form 3X)

		Use seperate schedule(s)		(check or		ıe) ie)	•	_ F	AGE	3/ / /	0	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1-	X 21b 27		22 28a	23 28b	24 28c	F	25 29	П	26 30b
	Information copied from such Reports and Stater										5	
	or commercial purposes, other than using the nam	ne and address of any politica	comn	nittee to s	SOlicit	contrib	utions fr	om such	comr	nittee		
	NAME OF COMMITTEE (In Full)											
/	Libertarian National Committee											
	Full Name (Last, First, Middle Initial)				-	Transa	ction ID	: SB21B	.219	560		
١.	Telecompute Corporation					Date of	Disburs / D		V - V	· · ·	V	
	Mailing Address P.O. Box 106019					0 1	]	5 /	2	0 ŏ 7		
	City	State Zip Code				Amoun	t of Each	Disburse	emen	t this F	erio	t
	Atlanta  Purpose of Dishurasment	GA 30348-6019				, T				62.3	36	
	Purpose of Disbursement Telecommunications Services			001		-	-		-	<u></u>		
	Candidate Name			tegory/								
			Т	уре								
		ement For:										
	Senate President	Primary General Other (specify) ▼										
	State: District:	cuio (opeeny) V										
	Full Name (Last, First, Middle Initial)				١.	Transa	ction ID	: SB21B	.219	562		
3.	US LEC Corp.						Disburs	ement				
	Mailing Address PO Box 601310					0 1	/ D	5 /	Ý ž	0 ŏ 7	Y	
	City Charlotte	State Zip Code NC 28260-1310				Amoun	t of Each	Disburs	emen	t this F	erio	d 
	Purpose of Disbursement					L.			. 1	1345.2	24	
	Phone and Data Services			001								
	Candidate Name			tegory/ ype								
	Office Sought: House Disburs	ement For:		<u>,,                                   </u>								
	Senate	Primary General										
	President State: District:	Other (specify) ▼										
	Full Name (Last, First, Middle Initial)					<b></b>	atian ID	. CD04D	010	F00		
).	Virginia Dept. of Taxation						Disburs	: SB21B ement	.218	526		
	Mailing Address PO Box 1278					0 1 M	/ D	9 /	Y Y	0 ŏ 7	Y	
	Walling Addicess PO Box 1276					-				-		
	City Richmond	State Zip Code VA 23218-1278				Amoun	t of Each	Disburse	emen	t this F	erio	t
	Purpose of Disbursement	V/3 20210-12/0			+					358.0	00	
	VA - Withholding			001								
	Candidate Name			tegory/ ype								
	Office Sought: House Disburs	ement For:		,,,,	$\exists$							
	Senate	Primary General										
	President	Other (specify)										
	State: District:										_	_
SI	JBTOTAL of Disbursements This Page (optional)			▶					1	765.6	0	
										-		ī
TC	<b>OTAL</b> This Period (last page this line number only	)		•								- 1

# SCHEDULE B (FEC Form 3X)

S	CHEDULE B (FEC Form 3X)	Use sene	erate schedule(s)					IUMBE	R:				PAGE	38 /	78
IT	EMIZED DISBURSEMENTS	for each	category of the Summary Page		(c X	heck 21b		one) <b>]</b> 22		23	Г	_ 	 4 Г	25	26
_						27		28a		28b			8c	29	30b
	y Information copied from such Reports and S for commercial purposes, other than using the														
$\vdash$	NAME OF COMMITTEE (In Full)		71												
$ \rangle$	Libertarian National Committee														
<b>′</b> А.	Full Name (Last, First, Middle Initial) Virginia Dept. of Taxation										_		1B.21	9527	
								Date of Disbursement  O 1 2 3 2 0 0 7							
	Mailing Address PO Box 1278						01 23 7 2007								
	City State Zip Code Richmond VA 23218-1278							Amou	ınt c	f Eac	h D	isbu	rseme	nt this	
	Purpose of Disbursement VA - Withholding				00	)1	1	L.	-	_		_		358.	.00
	Candidate Name			С	ate Ty	gory/ oe									
	Office Sought: House Dis Senate President	bursement For: Primary Other (spe	General ccify) ▼												
	State: District:														
В.	Full Name (Last, First, Middle Initial) Walton Press							Trans Date			_		1B.21	9564	
	Mailing Address 402 Mayfield Dr PO Box 966							$\begin{array}{c ccccccccccccccccccccccccccccccccccc$						7 <sup>Y</sup>	
	City Monroe	State GA	Zip Code 30655					Amount of Each Disbursement this							
	Purpose of Disbursement Non Candidate Party Printing/Mailing			Т	00	\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	1			_		_		1595.	.74
	Candidate Name			С	_	gory/	1								
	Office Sought:    House   Dis     Senate   President     State: District:	bursement For: Primary Other (spe	General cify) ▼												
_	Full Name (Last, First, Middle Initial)							Trans	sact	ion II	): S	B2	1B.21	9529	
C.	Walton Press							Date	of D м				V	V V	V
	Mailing Address 402 Mayfield Dr PO Box 966							0 1			1 9	Ó Í		žoŏ	7 '
	City Monroe	State GA	Zip Code 30655					Amou	ınt c	f Eac	h D	isbu	rseme		Period
	Purpose of Disbursement Non Canidate Specific Party Printing Mai				00	)3	1							9.	.55
	Candidate Name		ate Ty	gory/ oe											
	Office Sought:  Senate President  State:  Dis	bursement For: Primary Other (spe	General ecify) ▼												
	oldio. District.							_	_						
s	UBTOTAL of Disbursements This Page (option	onal)					<u> </u>							1963.	29
۱,	OTAL This Period (last page this line number	only)				ı	•								

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50	CHEDULE B (FEC Form 3X)	Use sepe	erate schedule(s)		NUMBER: PAGE 39 / 78
IT	EMIZED DISBURSEMENTS	for each o	category of the	(Check only	_ ·
		Detailed S	Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and Stater				
or	for commercial purposes, other than using the name	ie and addres	ss of any political	committee to so	licit contributions from such committee
$\mathbb{N}$	NAME OF COMMITTEE (In Full)				
$\angle$	Libertarian National Committee				
	Full Name (Last, First, Middle Initial)				Transaction ID: SB21B.219566
A.	Warner Norcross & Judd				Date of Disbursement
	Mailing Address 111 Lyon St NW 900 Old Kent Bldg				$\begin{bmatrix} \begin{smallmatrix} M & 1 & M \\ 0 & 1 & M \end{smallmatrix} & \begin{smallmatrix} D & D \\ 0 & 5 & D \end{smallmatrix} & \begin{smallmatrix} Y & \check{2} & 0 & \check{0} & 7 \\ & \check{2} & 0 & \check{0} & 7 \\ \end{smallmatrix}$
	City Grand Rapids	State MI	Zip Code 49503		Amount of Each Disbursement this Period
	Purpose of Disbursement	IVII	10000		2500.00
	Legal Services			001	
	Candidate Name			Category/	
	ouridiate Name			Type	
	Office Sought: House Disburs	ement For:		71	
	Senate	Primary	General		
	President	Other (spec	cify)		
	State: District:		•		
	Full Name (Last, First, Middle Initial)				Transaction ID: SB21B.219567
В.	Worldwide Express - DHL				Date of Disbursement
	Mailing Address 1911 North Ft. Myer Dr.	Ste 108			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & D \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Q & O & O & T \end{smallmatrix} \end{bmatrix}$
	City	State	Zip Code		Amount of Each Disbursement this Period
	Arlington	VA	22209		74.70
	Purpose of Disbursement				74.79
	Shipping Services			001	
	Candidate Name			Category/ Type	
	Office Sought: House Disburs	ement For:			
	Senate	Primary	General		
	President	Other (spec	cify)		

CURTOTAL of Diskurs are arts. This Days (artisass)		2574.79
SUBTOTAL of Disbursements This Page (optional)		201 1110
TOTAL This Period (last page this line number only)	•	77365.38

District:

State:

#### PAGE 40 / 78 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Candidate Party Printing/Mailing **Advanced Mailing Services** Mailing Address 14970 Farm Creek Drive ZIP Code City State Woodbridge VA 22191 Outstanding Balance Beginning This Period Transaction ID: SD10.216603 2524.75 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 2524.75 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Candidate Party Printing/Mailing **Advanced Mailing Services** Mailing Address 14970 Farm Creek Drive ZIP Code City State Woodbridge VA 22191 Outstanding Balance Beginning This Period Transaction ID: SD10.219598 0.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 2314.63 0.00 2314.63 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Advocates for Self Government Quiz Cards Mailing Address 5 South Public Square #304 ZIP Code City State Cartersville GΑ 30120 Outstanding Balance Beginning This Period Transaction ID: SD10.80520 830.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 830.00 3144.63 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

# SCHEDULE D (FEC Form 3X)

SCHEDULE D (FEC Form 3X)				e separate	PAGE 41 / 78					
	BTS AND OBLIGATIONS		sch	hedule(s)	FOR LINE NUMBER:					
	cluding Loans			or each bered line)	(check only one) 9 X 10					
NA	AME OF COMMITTEE (In Full) pertarian National Committee			'						
	<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or AskYourTech-Espherium, LLC	Creditor			ebt (Purpose): imputer Maintenan-					
	Mailing Address c/of Nick Zarzycki 1867 Mintwood place unit #3									
	City State Washington DC	ZIP Code 20009								
	Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.206657					
	500.00									
	Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period					
	0.00	0.00	)		500.00					
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor B & B Duplicators					ebt (Purpose): lidate Party Print- g					
	Mailing Address 818 18th Street NW LL15									
	City State Washington DC	ZIP Code 20006								
	Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.203468					
	37.02									
	Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Perio						
	0.00	0.00	)		37.02					
	<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or B & B Duplicators	Creditor		Nature of D Non Cand ing/Mailing	ebt (Purpose): lidate Party Print- g					
	Mailing Address 818 18th Street NW LL15									
	City State Washington DC	ZIP Code 20006								
	Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.216604					
	370.13									
	Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of This Period					
	0.00	0.00	)		370.13					
1)	SUBTOTALS This Period This Page (optional)		. •		907.15					
	TOTALS This Period (last page this line number only			<b>-</b>						
	TOTALS OUTSTANDING LOANS from Schedule C	·	—.	>						

#### PAGE 42 / 78 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Non Candidate Party Printing/Mailing B & B Duplicators Mailing Address 818 18th Street NW LL15 ZIP Code City State DC 20006 Washington Outstanding Balance Beginning This Period Transaction ID: SD10.219599 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1513.81 0.00 1513.81 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Dean Bankert Advertising Mailing Address 1080 Fairfield Road ZIP Code City State PA 17325 Gettysburg Outstanding Balance Beginning This Period Transaction ID: SD10.34463 22.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 0.00 22.50 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Blackbaud **Database Services** Mailing Address P.O. Box 930256 State ZIP Code City Atlanta GΑ 31193-0256 Outstanding Balance Beginning This Period Transaction ID: SD10.130069 1869.61 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1869.61 3405.92 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

#### PAGE 43 / 78 **SCHEDULE D (FEC Form 3X)** (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Annual Software Maintenance Agreement Blackbaud Mailing Address P.O. Box 930256 City State ZIP Code 31193-0256 Atlanta GΑ Outstanding Balance Beginning This Period Transaction ID: SD10.216605 6276.26 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 6276.26 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Software and Licensing Fees Blackbaud Mailing Address P.O. Box 930256 ZIP Code State City Atlanta GA 31193-0256 Outstanding Balance Beginning This Period Transaction ID: SD10.219601 0.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 1128.72 0.00 1128.72 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Edward Bowers** Advertising Mailing Address 291 S La Cienega Blvd # 638

1) SUBTOTALS This Period This Page (optional)	•	1	1	-	1	 119	2.4	7	1
2) TOTALS This Period (last page this line number only)	_				-	 			1
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	•					 	_		
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	_						_		

Payment This Period

0.00

Transaction ID: SD10.32948

Outstanding Balance at Close of This Period

63.75

ZIP Code

90211-3325

State

CA

Outstanding Balance Beginning This Period

Amount Incurred This Period

63.75

0.00

City

Beverly Hills

SCHEDULE D (FEC Form 3X)		(Use separate	PAGE 44 / 78
DEBTS AND OBLIGATIONS		schedule(s)	FOR LINE NUMBER:
		for each numbered line)	(check only one) 9 X 10
Excluding Loans  NAME OF COMMITTEE (In Full)		,	X 10
Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Virginia Brewer	Debtor or Creditor	Nature of D Advertisin	ebt (Purpose):
Virginia brewei		Auvertisii	9
Mailing Address P.O. Box 237			
City State Saunderstown RI	ZIP Code 02874		
Outstanding Balance Beginning This Pe	riod	Tra	nsaction ID: SD10.32954
56.25			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00	ם ו	56.25
B. Full Name (Last, First, Middle Initial) of Virginia Brewer	Nature of D Advertisin	ebt (Purpose):	
Mailing Address P.O. Box 237			
City State Saunderstown RI	ZIP Code 02874		
Outstanding Balance Beginning This Pe	riod	Tra	nsaction ID: SD10.33003
56.25			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		56.25
C. Full Name (Last, First, Middle Initial) of CANANWILL, INC	Debtor or Creditor	Nature of D Insurance	ebt (Purpose): Expense
Mailing Address PO Box # 19639			
City State	ZIP Code		
Newark NJ	07195-0639		
Outstanding Balance Beginning This Pe	riod	Tra	nsaction ID: SD10.219603
0.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
832.84	0.00	)	832.84
1) SUBTOTALS This Period This Page (op	tional).	<b>•</b>	945.34
2) TOTALS This Period (last page this line n	·	_ , ===================================	
3) TOTALS OUTSTANDING LOANS from			
U, ICIALO COIGIANDING LOANS IIOIII	Concade C (last page only)		

(Use separate schedule(s) for each

PAGE 45 / 78 FOR LINE NUMBER: (check only one) 9

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debto Commonwealth Digital Office Solutions	r or Creditor		ebt (Purpose): aintenance
Mailing Address 21205 Ridgetop Circle			
City State Sterling VA	ZIP Code 20166-6501		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.206659
132.19			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
0.00	0.00		132.19
B. Full Name (Last, First, Middle Initial) of Debto Commonwealth Digital Office Solutions	r or Creditor		ebt (Purpose): aintenance
Mailing Address 21205 Ridgetop Circle			
City State Sterling VA	ZIP Code 20166-6501		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.216606
297.56			
Amount Incurred This Period	Amount Incurred This Period Payment This Period		
0.00	297.56		0.00
C. Full Name (Last, First, Middle Initial) of Debto Commonwealth Digital Office Solutions	r or Creditor		ebt (Purpose): aintenance
Mailing Address 21205 Ridgetop Circle			
City State Sterling VA	ZIP Code 20166-6501		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.219604
0.00			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
105.75	0.00		105.75
1) SUBTOTALS This Period This Page (optional).		<b>•</b>	237.94
2) TOTALS This Period (last page this line number	only)	<b>&gt;</b>	
3) TOTALS OUTSTANDING LOANS from Sched	<b>&gt;</b>		
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page only)	- <b>-</b>	

## SCHEDULE D (FEC Form 3X) Ε

(Use separate

PAGE 46 / 78

DEBTS AND OBLIGATIONS	EBTS AND OBLIGATIONS			
xcluding Loans		for each numbered line)	(check only one) 9 X 10	
NAME OF COMMITTEE (In Full) Libertarian National Committee			1 11	
A. Full Name (Last, First, Middle Initial) of Debtor of Cook Political Report	or Creditor		ebt (Purpose): Subscription	
Mailing Address 600 New hampshire Ave NV	V			
City State Washington DC	ZIP Code 20037			
Outstanding Balance Beginning This Period 0.00		Trai	nsaction ID: SD10.219605	
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period	
497.03	0.00		497.03	
B. Full Name (Last, First, Middle Initial) of Debtor of CoreyStern.com	or Creditor		ebt (Purpose): ebsite Maintenan-	
Mailing Address 10420 Buckingham Drive				
City State Eden Prarie MN	ZIP Code 55347			
Outstanding Balance Beginning This Period  0.00			nsaction ID: SD10.219606	
Amount Incurred This Period 1910.54	Payment This Period 0.00	Outstandir	ng Balance at Close of This Period	
C. Full Name (Last, First, Middle Initial) of Debtor of Corporate & Leisure	or Creditor	Nature of D	ebt (Purpose):	
Mailing Address 2700 W. Cyprus Creek Roa Suite D-105	d			
City State Ft Lauderdale FL	ZIP Code 33309			
Outstanding Balance Beginning This Period 345.73		Trai	nsaction ID: SD10.171288	
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period	
0.00	0.00		345.73	
1) SUBTOTALS This Period This Page (optional)		<b>•</b>	2753.30	
2) TOTALS This Period (last page this line number or	nly)	<b>&gt;</b>		
3) TOTALS OUTSTANDING LOANS from Schedule	e C (last page only)	<b>&gt;</b>		
4) ADD 2) and 3) and carry forward to appropriate lir	ne of Summary Page (last page only)	<b>-</b>		

(Use separate schedule(s)

PAGE 47 / 78 FOR LINE NUMBER:

EBTS AND OBLIGATIONS		for each	(check only one)	9
xcluding Loans		numbered line)	, , ,	X 10
NAME OF COMMITTEE (In Full)				
Libertarian National Committee				
A Full Name (Last First Middle Initial) of Debter	or Craditar	Noture of D	obt (Durago)	
A. Full Name (Last, First, Middle Initial) of Debtor (Cory Consulting	or Greditor		ebt (Purpose): erver Maintenan-	
Cory Conduiting		ce	or vor mantonan	
Mailing Address 325 Garrisonville Road Suit	e 106			
City State	ZIP Code			
Stafford VA	22554			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.183	643
120.00				
Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of Thi	s Period
0.00	0.00		1	20.00
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	ebt (Purpose):	
Cory Consulting	Si Circuitor	Internet L	ist Svcs/Server	
, ,		Maintenar	nce	
Mailing Address 325 Garrisonville Road Suit	e 106			
City State	ZIP Code			
Stafford VA	22554			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.200	714
100.00				
			D	
Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of Thi	s Period
0.00	0.00			00.00
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	ebt (Purpose):	
Cory Consulting		Internet L Maintenar	ist Svcs/Server	
		iviairiteriai	ice	
Mailing Address 325 Garrisonville Road Suit	e 106			
City State	ZIP Code			
Stafford VA	22554			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.210	177
1105.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of Thi	s Period
0.00	1105.00			0.00
			220.00	
1) SUBTOTALS This Period This Page (optional)			220.00	
2) TOTALS This Period (last page this line number o	nly)	<b>&gt;</b>		
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	<b>&gt;</b>		
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only)	_ <b>,</b>		

#### PAGE 48 / 78 **SCHEDULE D (FEC Form 3X)** (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Internet List Svcs/Server Maintenance Cory Consulting Mailing Address 325 Garrisonville Road Suite 106 ZIP Code City State Stafford VA 22554 Outstanding Balance Beginning This Period Transaction ID: SD10.216608 1105.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1105.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Thomas Cox Advertising Mailing Address 12602 SW Farmington Road ZIP Code State City Beaverton OR 97005 Outstanding Balance Beginning This Period Transaction ID: SD10.32960 487.50 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 0.00 487.50 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Thomas Cox Advertising Mailing Address 12602 SW Farmington Road

1) SUBTOTALS This Period This Page (optional)		-	-	-	 	208	30.0	)0	
2) TOTALS This Period (last page this line number only)		1	-		-				
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)			_		 				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)					 				

Payment This Period

0.00

Transaction ID: SD10.32961

Outstanding Balance at Close of This Period

487.50

ZIP Code

97005

State

OR

Outstanding Balance Beginning This Period

Amount Incurred This Period

487.50

0.00

City Beaverton

(Use separate schedule(s)

PAGE 49 / 78 FOR LINE NUMBER:

entertier Leave		for each numbered line)	(check only one) 9
XCluding Loans NAME OF COMMITTEE (In Full)		Tidifibered line)	X 10
Libertarian National Committee			
		1	
A. Full Name (Last, First, Middle Initial) of Debtor CSC - Corp. Services Co.	or Creditor		ebt (Purpose): Filing and Regist-
000 00.p. 00000 00.		ration	ining and riogiot
Mailing Address PO Box 13397			
City State	ZIP Code		
Philadelphia PA	19101-3397		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.216609
319.00			
Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of This Period
0.00	0.00	•	319.00
0.00	0.00		010.00
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		ebt (Purpose):
De Lage Landen Financial		Copier Le	ase Agreement
Mailing Address PO Box 41601			
City State Philadelphia PA	ZIP Code 19101-1601		
Outstanding Balance Beginning This Period	10101 1001	Tue	
1 1 1 1 1 1 1 1 1		ıra	nsaction ID: SD10.203471
426.22			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	426.22		0.00
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	ebt (Purpose):
De Lage Landen Financial		Copier Le	ase Agreement
Mailing Address PO Box 41601			
maining / idaneses 1 O BOX 41001			
City State Philadelphia PA	ZIP Code 19101-1601		
-	19101-1001		.: 15 0010 010010
Outstanding Balance Beginning This Period		Ira	nsaction ID: SD10.216610
1147.76			
Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of This Period
0.00	147.66		1000.10
			1319.10
I) SUBTOTALS This Period This Page (optional)		_	1313.10
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nom Scriedul	e o (last page offig)	_	
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)	<b>&gt;</b>	

(Use separate schedule(s)

PAGE 50 / 78 FOR LINE NUMBER:

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Excluding Loans		for each numbered line)	(check only one)	X 10
NAME OF COMMITTEE (In Full)		•		
Libertarian National Committee				
A. Full Name (Last, First, Middle Initial) of Debtor or	Creditor	Nature of D	ebt (Purpose):	
District of Columbia Libertarian Party	Orcano	UMP payr		
Mailing Address 4700 First Otto 1 ON #000				
Mailing Address 4733 First Street SW #303				
City State	ZIP Code			
Washington DC	20005			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.346	810
87.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of Th	is Period
0.00	0.00			87.00
B. Full Name (Leat First Middle Initial) of Debter a	Craditar	Nature of D	obt (Duranos):	
B. Full Name (Last, First, Middle Initial) of Debtor or District of Columbia Libertarian Party	Creditor	Unified M	ebt (Purpose): embership Payment	
		to Affiliate	)	
Mailing Address 4733 First Street SW #303				
City State	ZIP Code			
Washington DC	20005			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.193	8887
30.00				
Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of Th	nis Period
0.00	0.00			30.00
<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or District of Columbia Libertarian Party	Creditor	Nature of D	ebt (Purpose): embership Payment	
District of Osiambia Elbortanian Faity		to Affiliate	embership Payment	
Mailing Address 4733 First Street SW #303				
City State	ZIP Code			
Washington DC	20005			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.200	729
17.96				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of Th	is Period
0.00	0.00		0 0 0 0	17.96
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PAGE 51 / 78 FO (ch

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DEBTS AND OBLIGATIONS		for each		(check only one)	9
Excluding Loans		numbered I	line)		X 10
NAME OF COMMITTEE (In Full)					
Libertarian National Committee					
A Full Name (Leat First Middle Initial) of Debter of	or Craditor	Notur	o of Do	ht (Burnoss):	
A. Full Name (Last, First, Middle Initial) of Debtor of Michael Dixon	or Creditor			ebt (Purpose): mbursement-Airf-	
mionas: 2mon		are	0		
Mailing Address 116 N Brackenbury Ln					
01.	710.0				
City State Charlotte NC	ZIP Code 28270-1901				
	20210-1301				
Outstanding Balance Beginning This Period			Tran	saction ID: SD10.11	0/93
439.32					
Amount Incurred This Period	Payment This Period	Outs	standin	g Balance at Close of T	his Period
0.00	0.00	,			439.32
0.00	0.00				403.0Z
B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Natur	e of De	ebt (Purpose):	
Doyle Printing & Offset		Non	Candi	date Party Print-	
		Ing/Iv	/lailing	1	
Mailing Address 6911 Old Landover Road					
City State	ZIP Code				
Landover MD	20785				
Outstanding Balance Beginning This Period			Tran	saction ID: SD10.21	16612
1216.13					
Amount Incurred This Period	Payment This Period	Outs	standin	g Balance at Close of T	his Period
0.00	0.00	) ,			1216.13
C. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor			ebt (Purpose): pliance/File Retri-	
Paula Edwards, CPA		eval	and R	lepair	
Mailing Address 1318 Roxanna Road NW					
City State Washington DC	ZIP Code 20012				
	20012				
Outstanding Balance Beginning This Period			Tran	saction ID: SD10.17	'7679
4175.00					
Amount Incurred This Period	Payment This Period	Outs	standin	g Balance at Close of 1	his Period
0.00	2000.00				2175.00
0.00	2000.00		1 1		170.00
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1) SUBTOTALS This Period This Page (optional)		▶		3830.	45
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(Use separate schedule(s)

PAGE 52 / 78 FOR LINE NUMBER:

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Excluding Loans		numbered line)	(Check only one) X 10		
NAME OF COMMITTEE (In Full) Libertarian National Committee					
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor ENTCO Int. Inc			Nature of Debt (Purpose): Convention Management Service		
Mailing Address 20016 Cedar Valley Road					
City State Lynnwood WA	ZIP Code 98036				
Outstanding Balance Beginning This Period		Ti	ransaction ID: SD10.206661		
500.00					
Amount Incurred This Period	Payment This Period	Outstan	ding Balance at Close of This Period		
0.00	0.00		500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or FP Mailing Solutions	Creditor		Debt (Purpose): Meter Resets		
Mailing Address Dept 4272					
City State Carol Stream IL	ZIP Code 60122-4272				
Outstanding Balance Beginning This Period		Ti	ransaction ID: SD10.216614		
79.85					
Amount Incurred This Period	Payment This Period	Outstan	ding Balance at Close of This Period		
0.00	79.85		0.00		
<b>c.</b> Full Name (Last, First, Middle Initial) of Debtor or Gillis Data & Information Services, LLc	Creditor		Debt (Purpose): 'Mailing Non Cand-		
Mailing Address 8990 Westchester Dr					
City State Manassas VA	ZIP Code 20112-4504				
Outstanding Balance Beginning This Period		Ti	ransaction ID: SD10.110797		
1277.39					
Amount Incurred This Period	Payment This Period	Outstan	ding Balance at Close of This Period		
0.00	0.00		1277.39		
1) SUBTOTALS This Period This Page (optional)		<b>•</b>	1777.39		
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(Use separate schedule(s)

PAGE 53 / 78 FOR LINE NUMBER:

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Excluding Loans			each red line)	(check only one)	X 10
NAME OF COMMITTEE (In Full)					
Libertarian National Committee					
A. Full Name (Last, First, Middle Initial) of Debtor or	Creditor			ebt (Purpose):	
Great American Leasing		P	ostage iv	leter Lease	
Mailing Address 8742 INNOVATION WAY					
-					
City State CHICAGO IL	ZIP Code 60682-0087				
	00002-0007			054004	0010
Outstanding Balance Beginning This Period			Trar	saction ID: SD10.21	6616
220.76					
Amount Incurred This Period	Payment This Period		Outstandin	g Balance at Close of T	his Period
0.00	96.63	3			124.13
B. Full Name (Last, First, Middle Initial) of Debtor of	Creditor			ebt (Purpose):	
Patrick Heller		A	dvertisin	g	
Mailing Address 300 Frandor Ave					
-					
City State Lansing MI	ZIP Code 48912-5290				
	40912-3290				
Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.34	464
850.00					
Amount Incurred This Period	Payment This Period		Outstandin	g Balance at Close of T	his Period
0.00	0.00				850.00
C. Full Name (Last, First, Middle Initial) of Debtor or	Creditor			ebt (Purpose):	
David Hollist		A	dvertisin	g	
Mailing Address PO Box 1414					
g C					
City State Alta Loma CA	ZIP Code 91701-8414				
	91701-0414				
Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.18	3263
45.00					
Amount Incurred This Period	Payment This Period		Outstandin	g Balance at Close of T	his Period
0.00	0.00				45.00
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(Use separate schedule(s) for each numbered line)

PAGE 54 / 78 FOR LINE NUMBER: (check only one) 9

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full)			
Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		ebt (Purpose):
David Hollist		Advertising	g
Mallian Address - DO Do - 4444			
Mailing Address PO Box 1414			
City State	ZIP Code		
Alta Loma CA	91701-8414		
Outstanding Balance Beginning This Period		Tran	nsaction ID: SD10.18264
		i i ai	1340(101112). 01510.10204
45.00			
Amount Incurred This Period	Payment This Period	Outstandin	ng Balance at Close of This Period
0.00	0.00		45.00
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of De	ebt (Purpose):
David Hollist		Advertising	
Mailing Address PO Box 1414			
City State	ZIP Code		
Alta Loma CA	91701-8414		
Outstanding Balance Beginning This Period		<b>-</b>	nsaction ID: SD10.18265
		ırar	1saction ID: 5D10.16265
45.00			
Amount Incurred This Period	Payment This Period	Outstandin	ng Balance at Close of This Period
0.00	0.00		45.00
	, , , , , , ,		,5,5
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of De	ebt (Purpose):
IVO Net LLC		LNC Voter	Database Softwa-
		re/Mainter	nance
Mailing Address 1836 Ashley River Rd. #333	3		
City State	ZIP Code		
Charleston SC	29407		
Outstanding Balance Beginning This Period		Tron	nsaction ID: SD10.216617
		IIai	ISACTION ID. 3D10.210017
1500.00			
Amount Incurred This Period	Payment This Period	Outstandin	ng Balance at Close of This Period
0.00	0.00		1500.00
	19180		
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A TOTAL OF THE BOLL OF THE STATE OF THE STAT			
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3) TOTALS OUTSTANDING LOANS from Schedul	e C. (last nage only)	<b>&gt;</b>	
5, 15 FALO GOTOTARISMA EGANO MOM GOMEGUM	(idot pago oilly)	_	
4) ADD 2) and 3) and carry forward to appropriate lin	ne of Summary Page (last page only)	<b>&gt;</b>	

(Use separate schedule(s) for each

PAGE 55 / 78 FOR LINE NUMBER: (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): LNC Voter Database Softwa-re/Maintenance IVO Net LLC Mailing Address 1836 Ashley River Rd. #333 City State ZIP Code 29407 Charleston SC Outstanding Balance Beginning This Period Transaction ID: SD10.219608 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1500.00 0.00 1500.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Candidate Party Printing/Mailing J&N Printing Mailing Address 5495 Glenthorne Court ZIP Code City State **Baltimore** MD 21237 Outstanding Balance Beginning This Period Transaction ID: SD10.216619 4643.53 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 0.00 4643.53 Nature of Debt (Purpose): C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Joe Ragan's Office Supplies Mailing Address PO Box 125 ZIP Code City State Soringfield VA 22150-0125 Outstanding Balance Beginning This Period Transaction ID: SD10.210178 199.42 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 158.10 41.32 6184.85 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

(Use separate schedule(s)

PAGE 56 / 78

FOR LINE NUMBER:	
check only one)	

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor or Joe Ragan's	Creditor	Nature of D Office Su	pebt (Purpose): pplies
Mailing Address PO Box 125			
City State Soringfield VA	ZIP Code 22150-0125		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.216620
1000.81			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		1000.81
B. Full Name (Last, First, Middle Initial) of Debtor or Joe Ragan's	Creditor	Nature of D Office Su	ebt (Purpose): pplies
Mailing Address PO Box 125			
City State Soringfield VA	ZIP Code 22150-0125		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.219609
0.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
487.79	0.00		487.79
C. Full Name (Last, First, Middle Initial) of Debtor or Krieg Family Trust	Creditor	Nature of D Advertisin	ebt (Purpose): ng
Mailing Address 23207 Night Heron Way			
City State Bradenton FL	ZIP Code 34202		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34417
200.00			
Amount Incurred This Period	Payment This Period		ng Balance at Close of This Period
0.00	0.00		200.00
1) SUBTOTALS This Period This Page (optional)		<b>•</b>	1688.60
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3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	<b>&gt;</b>	
4) ADD 2) and 3) and carry forward to appropriate line	e of Summary Page (last page only)	<b>-</b>	

CHEDULE D (FEC Form 3X)		(Use separate	PAGE 57 / 78		
		schedule(s)	FOR LINE NUMBER:		
cluding Loans		for each numbered line)	(check only one) 9 X 10		
AME OF COMMITTEE (In Full)		,			
bertarian National Committee					
A. Full Name (Last, First, Middle Initial) of Do Jack Lewis	ebtor or Creditor	Nature of D Advertisin	ebt (Purpose):		
Mailing Address 5206 Chinook Ave					
City State Boise ID	ZIP Code 83709-6122				
Outstanding Balance Beginning This Perio	d	Tra	nsaction ID: SD10.32977		
165.00					
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period		
0.00	0.00		165.00		
<b>B.</b> Full Name (Last, First, Middle Initial) of Double LIBERTARIAN PARTY OF GEORGIA	ebtor or Creditor		ebt (Purpose): embership Payment		
Mailing Address 1874 PIEDMONT RD S	SUITE 590-E				
City State GA	ZIP Code 30324				
Outstanding Balance Beginning This Perio	d	Tra	nsaction ID: SD10.190760		
2053.58					
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period		
0.00	0.00		2053.58		
C. Full Name (Last, First, Middle Initial) of De	ebtor or Creditor	Nature of D	ebt (Purpose):		
Libertarian Party of Maine		to Affiliate	embership Payment		
Mailing Address P.O. Box 2020					
City State Biddeford ME	ZIP Code 04005-8020				
Outstanding Balance Beginning This Perio		Tra	nsaction ID: SD10.180607		

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2) TOTALS This Period (last page this line number only)	_ ▶										
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4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	- ▶	L						<u>.</u>	<u>.                                    </u>		

Payment This Period

0.00

Outstanding Balance at Close of This Period

420.50

420.50

0.00

Amount Incurred This Period

(Use separate schedule(s) for each

PAGE 58 / 78 FOR LINE NUMBER: (check only one) 9

Excluding Loans		numbered line) (check strily she)		
NAME OF COMMITTEE (In Full) Libertarian National Committee				
Libertarian National Committee				
A. Full Name (Last, First, Middle Initial) of Debtor Libertarians for Life	or Creditor		ebt (Purpose):	
Libertarians for Life		Advertisin	9	
Mailing Address 13424 Hathaway Drive				
City State	ZIP Code			
Wheaton MD	20906			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34419	
18.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		18.00	
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	ebt (Purpose):	
Libertarians for Life		Advertisin	g	
Mailing Address 13424 Hathaway Drive				
City State	ZIP Code			
Wheaton MD	20906			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34420	
18.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		18.00	
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	ebt (Purpose):	
Libertarians for Life		Advertisin	g	
Mailing Address 13424 Hathaway Drive				
City State	ZIP Code			
Wheaton MD	20906			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34421	
18.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		18.00	
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(Use separate schedule(s)

PAGE 59 / 78 FOR LINE NUMBER:

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Excluding Loans		numbered line)	(Crieck offly offe) X 10					
NAME OF COMMITTEE (In Full) Libertarian National Committee								
A. Full Name (Last, First, Middle Initial) of Debtor of Libertarians for Life	or Creditor		Nature of Debt (Purpose): Advertising					
Mailing Address 13424 Hathaway Drive								
City State Wheaton MD	ZIP Code 20906							
Outstanding Balance Beginning This Period		Tran	saction ID: SD10.34422					
18.00								
Amount Incurred This Period	Payment This Period	Outstanding	g Balance at Close of This Period					
0.00	0.00		18.00					
<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor of Libertarians for Life	or Creditor	Nature of De Advertising	bt (Purpose):					
Mailing Address 13424 Hathaway Drive								
City State Wheaton MD	ZIP Code 20906							
Outstanding Balance Beginning This Period		Tran	saction ID: SD10.34423					
18.00								
Amount Incurred This Period	Payment This Period	Outstanding	g Balance at Close of This Period					
0.00	0.00		18.00					
C. Full Name (Last, First, Middle Initial) of Debtor of Libertarians for Life	or Creditor	Nature of De Advertising	bt (Purpose):					
Mailing Address 13424 Hathaway Drive								
City State Wheaton MD	ZIP Code 20906							
Outstanding Balance Beginning This Period		Tran	saction ID: SD10.34424					
18.00								
Amount Incurred This Period	Payment This Period	Outstanding	g Balance at Close of This Period					
0.00	0.00		18.00					
1) SUBTOTALS This Period This Page (optional)		<b>•</b>	54.00					
2) TOTALS This Period (last page this line number or	nly)	<b>&gt;</b>						
3) TOTALS OUTSTANDING LOANS from Schedule	e C (last page only)	<b>&gt;</b>						
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PAGE 60 / 78 FOR LINE NUMBER:

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Excluding Loans		for each numbered line)	(check only one)	X 10
NAME OF COMMITTEE (In Full)		,		
Libertarian National Committee				
A. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		ebt (Purpose):	
Libertarians for Life		Advertisin	g	
Mailing Address 12404 Hathaway Drive				
Mailing Address 13424 Hathaway Drive				
City State	ZIP Code			
Wheaton MD	20906			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34	1425
18.00				
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Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of T	nis Period
0.00	0.00			18.00
<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor of Libertarians for Life	or Creditor		ebt (Purpose):	
Libertarians for Life		Advertisin	g	
Mailing Address 13424 Hathaway Drive				
To 121 Hathaway Billo				
City State	ZIP Code			
Wheaton MD	20906			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34	1426
18.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of T	This Pariod
			ig Balance at Glose of 1	
0.00	0.00			18.00
C. Full Name /Last First Middle Initial) of Debter of	or Craditor	Nature of D	abt (Duranasa):	
C. Full Name (Last, First, Middle Initial) of Debtor of Libertarians for Life	or Creditor	Advertisin	ebt (Purpose): a	
			9	
Mailing Address 13424 Hathaway Drive				
City. Chata	710.0-4-			
City State Wheaton MD	ZIP Code 20906			
		_	.: ID 0D4004	1407
Outstanding Balance Beginning This Period		ıra	nsaction ID: SD10.34	1427
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Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of T	Γhis Period
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4) ADD 2) and 3) and carry forward to appropriate lin	e of Summary Page (last page only)	<b>&gt;</b>		

(Use separate schedule(s)

PAGE 61 / 78 FOR LINE NUMBER:

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Excluding Loans		Humb	erea iirie)		X   10
NAME OF COMMITTEE (In Full) Libertarian National Committee					
Libertarian National Committee					
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	ebt (Purpose):	
Libertarians for Life			Advertisin	g	
Moiling Address 12424 Hotheway Drive					
Mailing Address 13424 Hathaway Drive					
City State	ZIP Code				
Wheaton MD	20906				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.34	1428
18.00					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of T	This Period
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0.00	0.00	0			10.00
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	ebt (Purpose):	
Libertarian Students.org				Development	
Maillian Address 200 All add Oct.					
Mailing Address 260 Albert Court					
City State	ZIP Code				
Charlottesville VA	22901				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.21	16621
500.00					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of T	This Period
		0	- Gutottanium	.g _ a.a o a. a. a. a. a.	-
0.00	500.00	U			0.00
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of D	ebt (Purpose):	
Wanda Logan			Advertisin		
Mailian Address 0740 Have III Land					
Mailing Address 3718 Hoadly Loop					
City State	ZIP Code				
Tumwater WA	98501				
Outstanding Balance Beginning This Period			Trai	nsaction ID: SD10.34	1434
84.00					
Amount Incurred This Period	Payment This Period		Outstandir	ng Balance at Close of T	Γhis Period
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(Use separate schedule(s)

PAGE 62 / 78 FOR LINE NUMBER:

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xcluding Loans		numbered line)		X   10
IAME OF COMMITTEE (In Full)				
ibertarian National Committee				
A. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature of D	ebt (Purpose):	
Wanda Logan	or Creation	Advertisin		
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Mailing Address 3718 Hoadly Loop				
01	710.0			
City State Tumwater WA	ZIP Code 98501			
	30301			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34	436
84.00				
Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of T	his Period
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0.00	0.00	,		84.00
B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature of D	ebt (Purpose):	
Wanda Logan	Si Cication	Advertisin		
Mailing Address 3718 Hoadly Loop				
City State	ZIP Code			
City State Tumwater WA	98501			
		_	0040.04	407
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34	437
84.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of T	his Period
0.00	0.00	)		84.00
				7 0
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of D	ebt (Purpose):	
Wanda Logan		Advertsiin	g	
N				
Mailing Address 3718 Hoadly Loop				
City State	ZIP Code			
Tumwater WA	98501			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34	438
84.00				
Amount Incurred This Period	Payment This Period	Outstandii	ng Balance at Close of T	his Period
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Transaction ID: SD10.34441

Outstanding Balance at Close of This Period

84.00

CHEDULE D (FEC Form 3X)		(Use separate	PAGE 63 / 78
EBTS AND OBLIGATIONS		schedule(s) for each numbered line)	FOR LINE NUMBER: (check only one)
AME OF COMMITTEE (In Full)	<u> </u>	Tidribered line)	X 10
ibertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor Wanda Logan	or Creditor	Nature of D Advertisin	rebt (Purpose):
Mailing Address 3718 Hoadly Loop			
City State Tumwater WA	ZIP Code 98501		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34439
84.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		84.00
B. Full Name (Last, First, Middle Initial) of Debtor Wanda Logan	or Creditor	Nature of D Advertisin	ebt (Purpose):
Mailing Address 3718 Hoadly Loop			
City State Tumwater WA	ZIP Code 98501		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.34440
84.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		84.00
C. Full Name (Last, First, Middle Initial) of Debtor Wanda Logan	or Creditor	Nature of D Advertisin	rebt (Purpose):
Mailing Address 3718 Hoadly Loop			
City State	7IP Code		

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Payment This Period

0.00

98501

WA

Outstanding Balance Beginning This Period

Amount Incurred This Period

84.00

0.00

Tumwater

(Use separate schedule(s) for each

PAGE 64 / 78 FOR LINE NUMBER: (check only one)

Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full)			
Libertarian National Committee			
		1	
A. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Debt (Purpose):
Wanda Logan		Advertisir	ıg
Mailing Address 3718 Hoadly Loop			
Walling Address 37 To Floadily Loop			
City State	ZIP Code		
Tumwater WA	98501		
Outstanding Balance Beginning This Period		Tra	insaction ID: SD10.34442
84.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		84.00
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Pebt (Purpose):
Wanda Logan		Advertisin	ng
M ''' A L L			
Mailing Address 3718 Hoadly Loop			
City State	ZIP Code		
Tumwater WA	98501		
Outstanding Balance Beginning This Period		Tra	insaction ID: SD10.34444
84.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		84.00
C. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Pebt (Purpose):
Wanda Logan		Advertisin	ng
Mailing Address 3718 Hoadly Loop			
Walling Address 37 18 1 loadly Loop			
City State	ZIP Code		
Tumwater WA	98501		
Outstanding Balance Beginning This Period		Tra	insaction ID: SD10.34445
84.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
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		_	252.00
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3) TOTALS OUTSTANDING LOANS from Schedu	le C (last page only)	<b>&gt;</b>	
4) ADD 2) and 3) and carry forward to appropriate I	ine of Summary Page (last page calls)		
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(Use separate schedule(s) for each numbered line)

PAGE 65 / 78 FOR LINE NUMBER: (check only one) 9 X 10

Excluding Loans	numbered line)	X 10
NAME OF COMMITTEE (In Full)		
Libertarian National Committee		
	1	

A. Full Name (Last, First, Middle Initial) of Debtor of Wanda Logan	Nature of Debt (Purpose): Advertising	
Mailing Address 3718 Hoadly Loop		
City State Tumwater WA	ZIP Code 98501	
Outstanding Balance Beginning This Period		Transaction ID: SD10.34447
84.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	84.00
B. Full Name (Last, First, Middle Initial) of Debtor of Wanda Logan	Nature of Debt (Purpose): Advertising	
Mailing Address 3718 Hoadly Loop	_	
City State Tumwater WA	ZIP Code 98501	
Outstanding Balance Beginning This Period		Transaction ID: SD10.34448
84.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	84.00
C. Full Name (Last, First, Middle Initial) of Debtor of MV Global	or Creditor	Nature of Debt (Purpose): Telephone Systems
Mailing Address 932 Sligo Ave		-
City State	ZIP Code	
Silver Spring MD	20910	
Outstanding Balance Beginning This Period		Transaction ID: SD10.80546
630.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	630.00
SUBTOTALS This Period This Page (optional)		▶ 798.00
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(Use separate schedule(s)

PAGE 66 / 78 FOR LINE NUMBER:

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Excluding Loans		numbered line)	(Check only one) 9 X 10					
NAME OF COMMITTEE (In Full) Libertarian National Committee								
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ed Nagel			Nature of Debt (Purpose): Advertising					
Mailing Address PO Box 2823								
City State Santa Fe NM	ZIP Code 87504-2823							
Outstanding Balance Beginning This Period		Trai	nsaction ID: SD10.32982					
105.00								
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period					
0.00	0.00		105.00					
B. Full Name (Last, First, Middle Initial) of Debtor National Electronic Type, Inc	or Creditor		ebt (Purpose): ated Non Candida- Svc					
Mailing Address 2320 S. Kansas Ave								
City State Topeka KS	ZIP Code 66611							
Outstanding Balance Beginning This Period		Trai	nsaction ID: SD10.210179					
1045.44								
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period					
0.00	0.00		1045.44					
C. Full Name (Last, First, Middle Initial) of Debtor NetFire.com - Speakeasy	or Creditor		ebt (Purpose): osting Services					
Mailing Address c/o Speakeasy Accounts R	eceivable							
City State	ZIP Code							
Seattle WA  Outstanding Balance Beginning This Period	98101	<b>-</b>						
280.37		irai	nsaction ID: SD10.171294					
Amount Incurred This Period	Payment This Period	Outotondir	og Polonoo at Class of This Pariod					
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3) TOTALS OUTSTANDING LOANS from Schedu	le C (last page only)	<b>&gt;</b>						
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(Use separate schedule(s)

PAGE 67 / 78 FOR LINE NUMBER:

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Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor or P Samuel New	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor P Samuel New		
Mailing Address 1227 1/2 Massachusetts Ave.	, SE		
City State Washington DC	ZIP Code 20003		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.69887
88.81			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		88.81
<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or P Samuel New	Creditor		lebt (Purpose): h Reimbursement
Mailing Address 1227 1/2 Massachusetts Ave.	, SE		
City State Washington DC	ZIP Code 20003		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.80549
270.01			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	0.00		270.01
C. Full Name (Last, First, Middle Initial) of Debtor or Tom Pilitowski	Creditor	Nature of D Advertisin	ebt (Purpose): ng
Mailing Address 3280-55A Tamiami Trail #297	7		
City State Port Charlotte FL	ZIP Code 33952		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.19575
19.50			
Amount Incurred This Period	Payment This Period		ng Balance at Close of This Period
0.00	0.00		19.50
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3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	<b>&gt;</b>	
4) ADD 2) and 3) and carry forward to appropriate line	of Summary Page (last page only)	<b>&gt;</b>	

SCHEDULE D (FEC Form 3X)		(Use separate	PAGE 68 / 78
DEBTS AND OBLIGATIONS		schedule(s) for each	FOR LINE NUMBER:
excluding Loans		numbered line)	(check only one) 9 X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			[11] 10
A. Full Name (Last, First, Middle Initial) of Debt Tom Pilitowski	or or Creditor	Nature of D Advertisin	ebt (Purpose): g
Mailing Address 3280-55A Tamiami Trail	#297		
City State Port Charlotte FL	ZIP Code 33952		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.19576
19.50			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
0.00	0.00		19.50
B. Full Name (Last, First, Middle Initial) of Debt Tom Pilitowski  Mailing Address 3280-55A Tamiami Trail	#297 ZIP Code	Nature of D Advertisin	ebt (Purpose): g
Port Charlotte FL	33952		
Outstanding Balance Beginning This Period 19.50		Tra	nsaction ID: SD10.19577
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
0.00	0.00		19.50
C. Full Name (Last, First, Middle Initial) of Debt Tom Pilitowski	or or Creditor	Nature of D Advertisin	ebt (Purpose): g
Mailing Address 3280-55A Tamiami Trail	#297		
City State Port Charlotte FL	ZIP Code 33952		
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.19578
19.50			
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period
0.00	0.00		19.50

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(Use separate schedule(s)

PAGE 69 / 78

FOR LINE NUMBER:		
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Excluding Loans		numbered line)	X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor or Tom Pilitowski	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tom Pilitowski		
Mailing Address 3280-55A Tamiami Trail #297	7		
City State Port Charlotte FL	ZIP Code 33952		
Outstanding Balance Beginning This Period		Ti	ransaction ID: SD10.19579
19.50			
Amount Incurred This Period	Payment This Period	Outstan	ding Balance at Close of This Period
0.00	0.00		19.50
<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Tom Pilitowski	Creditor	Nature of Advertis	Debt (Purpose): ing
Mailing Address 3280-55A Tamiami Trail #297	7		
City State Port Charlotte FL	ZIP Code 33952		
Outstanding Balance Beginning This Period		Tı	ransaction ID: SD10.19580
19.50			
Amount Incurred This Period	Payment This Period	Outstan	ding Balance at Close of This Period
0.00	0.00		19.50
C. Full Name (Last, First, Middle Initial) of Debtor or Tom Pilitowski	Creditor	Nature of Advertis	Debt (Purpose): ing
Mailing Address 3280-55A Tamiami Trail #297	7		
City State Port Charlotte FL	ZIP Code 33952		
Outstanding Balance Beginning This Period		Ti	ransaction ID: SD10.19581
19.50			
Amount Incurred This Period	Payment This Period	Outstan	ding Balance at Close of This Period
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3) TOTALS OUTSTANDING LOANS from Schedule 0	C (last page only)	<b>&gt;</b>	
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(Use separate schedule(s)

PAGE 70 / 78 FOR LINE NUMBER:

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Excluding Loans		for each numbered line)	· · · · · · · · · · · · · · · · · · ·	9 10					
NAME OF COMMITTEE (In Full)		,		10					
Libertarian National Committee									
A Full Name /Last First Middle Initial) of Debter of	- Craditor	Noture of F	laht (Duranaa)						
A. Full Name (Last, First, Middle Initial) of Debtor of Roger Pope	r Creditor		Nature of Debt (Purpose): Ballot access petitioning						
- reger i ope			occ pointerning						
Mailing Address 1916-C Wilmette Ave									
City State	ZIP Code								
Wilmette IL	60091								
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.37009						
726.00									
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Per	riod					
	0.00		726.0						
0.00	0.00		720.0	U					
B. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor	Nature of D	Pebt (Purpose):						
QUI1 - Quill Corporation		Office Su							
Mailing Address DO Boy 04091									
Mailing Address PO Box 94081									
City State	ZIP Code								
Palatine IL	60094-4801								
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.171295						
201.40									
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Per	riod					
0.00	0.00		201.4	-0					
C. Full Name (Last, First, Middle Initial) of Debtor of	or Creditor		ebt (Purpose):						
Richard Rider		Advertisir	ng						
Mailing Address 10969 Red Cedar Dr									
City State San Diego CA	ZIP Code 92131-1306								
Outstanding Balance Beginning This Period		Tro	nsaction ID: SD10.34465						
		IIa	iisaction ib. 3D10.34403						
137.50									
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Per	riod					
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# **SCHEDULE D (FEC Form 3X)**

(Use separate schedule(s)

PAGE 71 / 78 FOR LINE NUMBER:

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	AME OF COMMITTEE (In Full) bertarian National Committee					
_						
	A. Full Name (Last, First, Middle Initial) of Debtor of	r Creditor			ebt (Purpose):	
	Steve Rosa			LP Station lishing	nery Desktop Pub-	
	Mailing Address 4829 West Braddock Road,	Ant 3				
	1020 Froot Braddook Froda, 7 pt 0					
	City State Alexandria VA	ZIP Code 22311				
		22311				
	Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.21	6623
	70.00					
	Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of T	his Period
	0.00	70.00	0			0.00
	B. Full Name (Last, First, Middle Initial) of Debtor of	r Creditor			ebt (Purpose):	
	Steve Rosa			Non Candi op Publish	idate Party Deskt- ning	
	Mailing Address 4829 West Braddock Road, Apt 3					
	·					
	City State Alexandria VA	ZIP Code 22311				
		22011	I	<b></b>	CD10.01	2204
	Outstanding Balance Beginning This Period			I rar	nsaction ID: SD10.21	6624
	420.00					
	Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of T	his Period
	0.00	157.50	0		A A A A A	262.50
	C. Full Name (Last, First, Middle Initial) of Debtor of Steve Rosa	r Creditor		Nature of De	ebt (Purpose):	
	Sieve nosa			op Publish	idate Party Deskt- ning	
	Mailing Address 4829 West Braddock Road,	Apt 3				
	City State	ZIP Code				
	Alexandria VA	22311				
	Outstanding Balance Beginning This Period			Trar	nsaction ID: SD10.21	
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	Amount Incurred This Period	Payment This Period		Outstandin	ng Balance at Close of T	his Period
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PAGE 72 / 78

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Excluding Loans nun		numbered line) X 10
NAME OF COMMITTEE (In Full) Libertarian National Committee		
A. Full Name (Last, First, Middle Initial) of Debtor Corey Stern	or Creditor	Nature of Debt (Purpose): Advertising
Mailing Address 10420 Buckingham Dr		
City State Eden Prairie MN	ZIP Code 55347-2939	
Outstanding Balance Beginning This Period		Transaction ID: SD10.32992
48.75		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):
Corey Stern		Advertising
Mailing Address 10420 Buckingham Dr		
City State Eden Prairie MN	ZIP Code 55347-2939	
Outstanding Balance Beginning This Period		Transaction ID: SD10.32993
48.75		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	48.75
C. Full Name (Last, First, Middle Initial) of Debtor Corey Stern	or Creditor	Nature of Debt (Purpose): Advertising
Corey Sterri		, avertising
Mailing Address 10420 Buckingham Dr		
City State	ZIP Code	
Eden Prairie MN	55347-2939	
Outstanding Balance Beginning This Period		Transaction ID: SD10.32994
48.75		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	48.75
1) SUBTOTALS This Period This Page (optional)		<b>▶</b> 146.25
2) TOTALS This Period (last page this line number o		>
3) TOTALS OUTSTANDING LOANS from Schedul	e C (last page only)	<b>&gt;</b>
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summary Page (last page only)	<b>•</b>

#### PAGE 73 / 78 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Non Candidate Party Printing/Mailing Studio Designs Printing Co Mailing Address P.O. Box 845 City State ZIP Code Milledgeville 31059-0845 GΑ Outstanding Balance Beginning This Period Transaction ID: SD10.216625 800.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 800.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Telecommunications Servic-**Telecompute Corporation** Mailing Address P.O. Box 106019 ZIP Code State City Atlanta GA 30348-6019 Outstanding Balance Beginning This Period Transaction ID: SD10.210181 62.36 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 62.36 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Telecompute Corporation** Telecommunications Servic-Mailing Address P.O. Box 106019 State ZIP Code City Atlanta GΑ 30348-6019 Outstanding Balance Beginning This Period Transaction ID: SD10.216626 59.37 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 59.37 59.37 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

(Use separate schedule(s) for each numbered line)

PAGE 74 / 78 FOR LINE NUMBER: 9 X 10 (check only one)

Excluding Loans		numbered line)	X 10	
NAME OF COMMITTEE (In Full) Libertarian National Committee				
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Telecompute Corporation			Nature of Debt (Purpose): Telecommunications Services	
Mailing Address P.O. Box 106019				
City State Atlanta GA	ZIP Code 30348-6019			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.219611	
0.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
39.80	0.00		39.80	
<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Tri-State	Creditor		ebt (Purpose): Services Non Can-	
Mailing Address Attn: Nancy/David 6900 Faigle Road				
City State Beltsville MD	ZIP Code 20705			
Outstanding Balance Beginning This Period		Tra	nsaction ID: SD10.110805	
65.00				
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	0.00		65.00	
<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or US LEC Corp.	Creditor		lebt (Purpose): Jidate Party Print- 9	
Mailing Address PO Box 601310				
City State Charlotte NC	ZIP Code 28260-1310			
Outstanding Balance Beginning This Period	20200 1010	Tra	nsaction ID: SD10.216627	
2489.19		110	insuction is: OB 10.210027	
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00	1345.24		1143.95	
1) SUBTOTALS This Period This Page (optional)		<b>•</b>	1248.75	
2) TOTALS This Period (last page this line number only	y)	_ <b>&gt;</b>		
3) TOTALS OUTSTANDING LOANS from Schedule	C (last page only)	<b>&gt;</b>		
4) ADD 2) and 3) and carry forward to appropriate line	of Summary Page (last page only)	<b>&gt;</b>		

#### PAGE 75 / 78 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Libertarian National Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Party Printing/Mailing Non Candidate Walton Press Mailing Address 402 Mayfield Dr PO Box 966 ZIP Code City State 30655 Monroe GA Outstanding Balance Beginning This Period Transaction ID: SD10.216628 1595.74 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1595.74 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal Services Warner Norcross & Judd Mailing Address 111 Lyon St NW 900 Old Kent Bldg ZIP Code State City **Grand Rapids** MI 49503 Outstanding Balance Beginning This Period Transaction ID: SD10.216629 2500.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 2500.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Warner Norcross & Judd Legal Services Mailing Address 111 Lyon St NW 900 Old Kent Bldg State ZIP Code City **Grand Rapids** MI 49503 Outstanding Balance Beginning This Period Transaction ID: SD10.219612 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 3708.25 0.00 3708.25 3708.25 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

(Use separate schedule(s) for each

PAGE 76 / 78 FOR LINE NUMBER: 9 (check only one)

Excluding Loans	,	
NAME OF COMMITTEE (In Full)		
Libertarian National Committee		

Excluding Loans		numbered line)	X  10
NAME OF COMMITTEE (In Full)			
Libertarian National Committee			
A. Full Name (Last, First, Middle Initial) of Debtor Washington Pension Center	or Creditor	Nature of Debt 401 K Plan F	
Mailing Address 7315 Wisconsin Ave Ste 50	00 West		
City State Bethesda MD	ZIP Code 20814-3206		
Outstanding Balance Beginning This Period		Transa	oction ID: SD10.175121
Amount Incurred This Period	Payment This Period	Outstanding I	Balance at Close of This Period
0.00	0.00		100.00
<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor Worldwide Express - DHL	or Creditor	Nature of Debt Shipping/De	(Purpose): ivery Services
Mailing Address 1911 North Ft. Myer Dr. Ste	e 108		
City State Arlington VA	ZIP Code 22209		
Outstanding Balance Beginning This Period		Transa	action ID: SD10.216630
114.01			
Amount Incurred This Period	Payment This Period	Outstanding I	Balance at Close of This Period
0.00	74.79		39.22
C. Full Name (Last, First, Middle Initial) of Debtor Worldwide Express - DHL	or Creditor	Nature of Debt Shipping/De	(Purpose): ivery Services
Mailing Address 1911 North Ft. Myer Dr. Ste	e 108		
City State Arlington VA	ZIP Code 22209		
Outstanding Balance Beginning This Period 0.00		Transa	ction ID: SD10.219613
Amount Incurred This Period	Payment This Period		Balance at Close of This Period
40.41	0.00		40.41
1) SUBTOTALS This Period This Page (optional)		<b>•</b>	179.63
2) TOTALS This Period (last page this line number of	only)	<b>&gt;</b>	45624.09
3) TOTALS OUTSTANDING LOANS from Schedu	le C (last page only)	<b>&gt;</b>	
4) ADD 2) and 3) and carry forward to appropriate li	ine of Summary Page (last page only)	<b>-</b>	

#### Image# 27950089455

Form/Schedule: **F3XN**Transaction ID:

The Committee wishes to disclose the following: 1) No expenditures designated on Schedule B supporting Line 21b were made on behalf of any specifically identified federal candidate. 2) The Libertarian National Committee (LNC) requests address, employer, and occupation information from all contributors whose yearly aggregate contributions exceed \$200.00 and informs them of the requirement of complying with 11 CFR 104.7(b)(1). In the event that the information is not supplied as a result of the initial request, Committee makes a subsequent attempt to collect the information by mail, email, or telephone contact within 30 days of the initial contribution. This follow up' request a) clearly asks for the missing information without requesting a contribution, b) informs the contributor of the requirements for reporting such information under federal law, and c) is enclosed with a pre-addressed envelope when sent by postal mail. If the information is submitted after the initial monthly report is filed, the contributor master file is updated and the information is corrected in a subsequent amendment filed by the next regularly scheduled reporting date. The Committee also makes periodic requests during the year for all contributors to update their contact information and for contributors whose yearly contributions aggregate to more than \$200 to update their Employer/Occupation information.

Form/Schedule: **SD10** A credit of \$24,188.93 has been issued by the vendor as settlement for disputed charges on this account, resul-Transaction ID: **SD10.13006** in a reduction of the current debt balance of \$1,365.19.

#### Image# 27950089456

IIIage# 2/330003430	
Form/Schedule: <b>SD10</b> A credit of \$24,188.93 has been issued by the vendor as settlement for disputed charges on this account, resul- Transaction ID: <b>SD10.21660</b> in a reduction of the current debt balance of \$1,365.19.	